

Dear Parent,
Greetings of the season from The Pupil!!

Kindly fill in the swimming consent form given below and return it to your ward's class teacher.

Class Teacher's Name:

Signature of the Class Teacher:

=====Tear here and return to the class teacher =====

I, _____ parent of _____ of Std __ Sec__ hereby agree to/ disagree to
(tick whatever is applicable) my ward attending the swimming classes. I assure you that my ward
is medically fit to take part in the swimming classes.

Name of the parent:

Signature of the parent:
