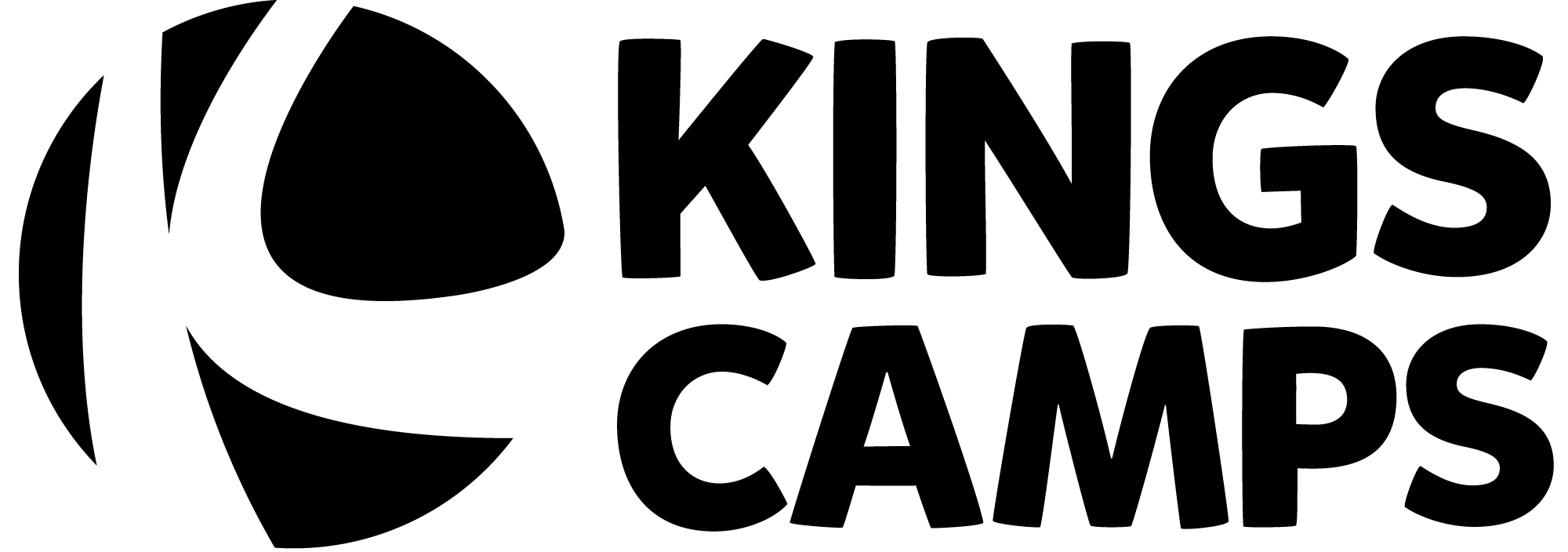
Permission for

Off-Site Visit

To be completed when a child is due to visit an off-site facilities during camp.

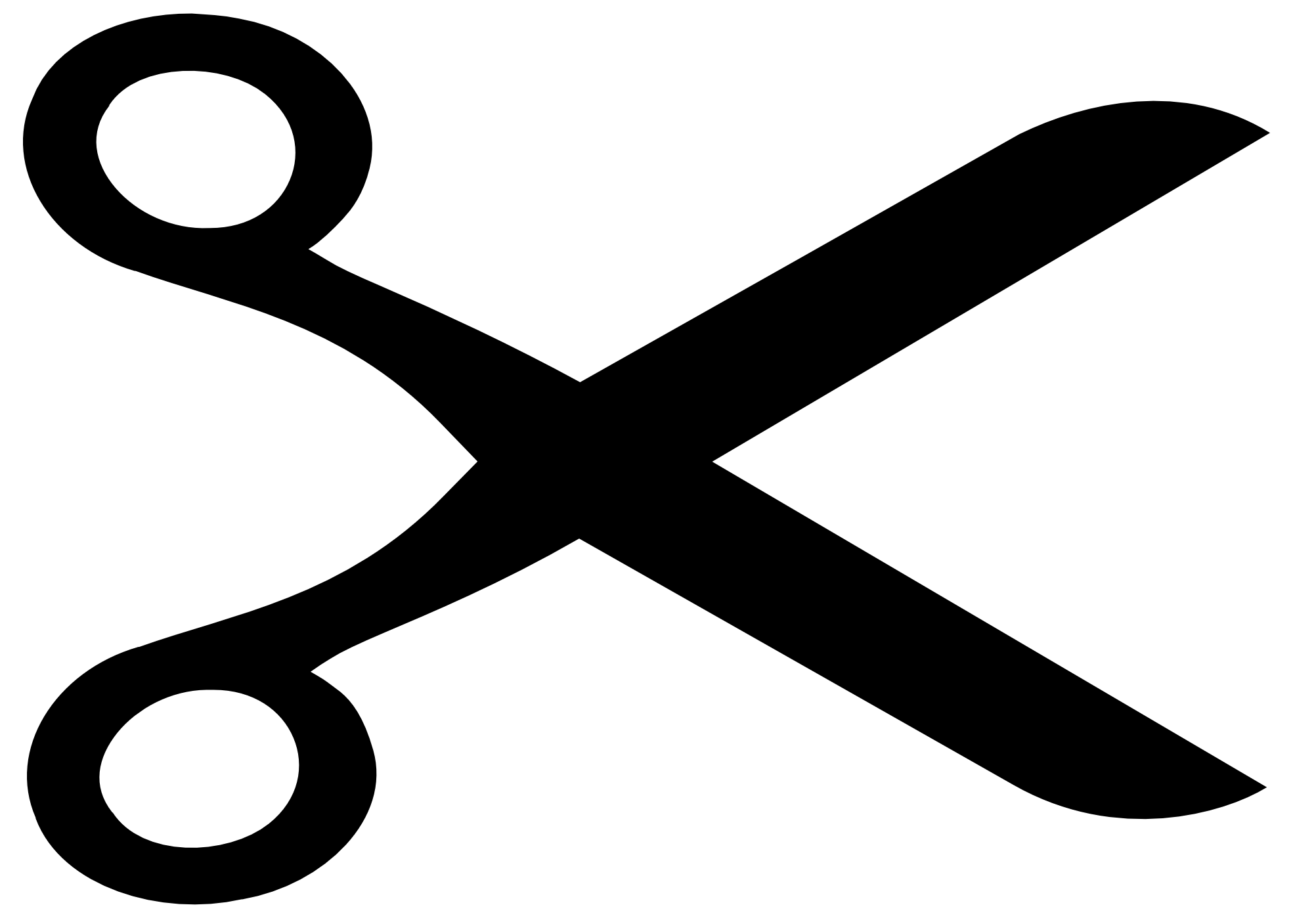
Child Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent\Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Camp Venue (please circle as appropriate):** Sheffield High School \ Kirkham Grammar School

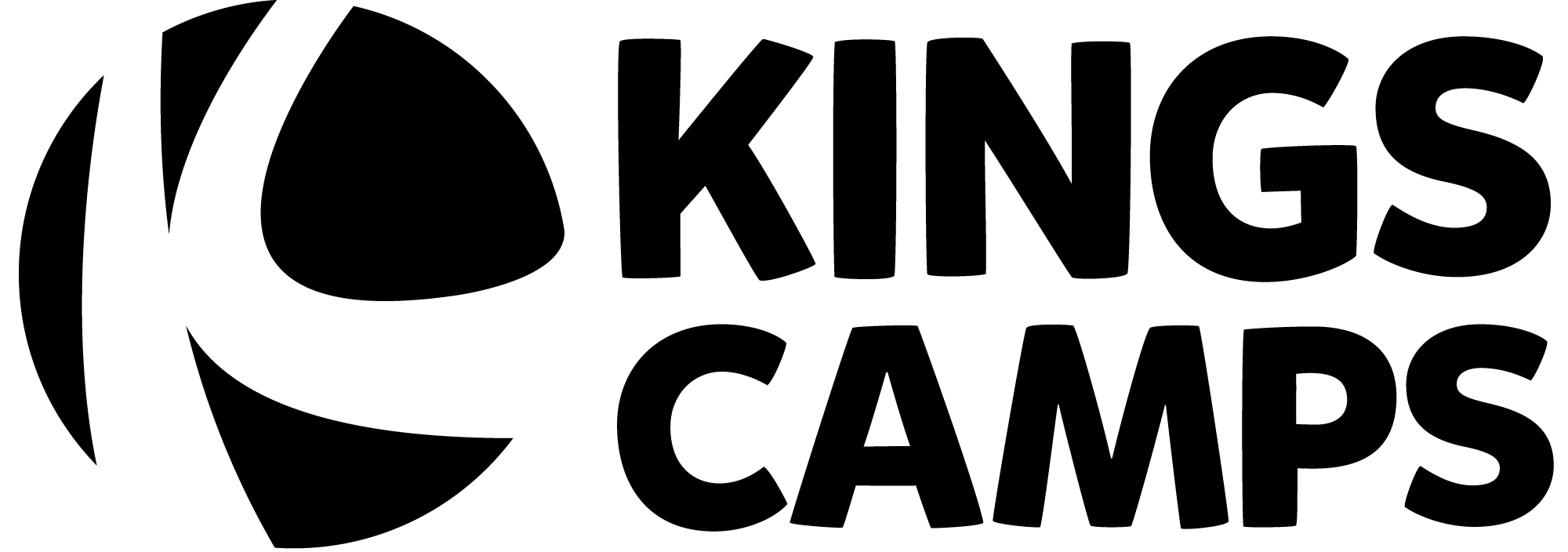
**Activity \ Visit (please tick as appropriate):**

* Swimming at King Edwards Swimming Pool – Clarkhouse Road, Sheffield. S10 2LB
* Swimming at Rural Splash YMCA – Station Road, Kirkham. PR4 2HA

I give my permission for my child to attend the event \ activity organized by Kings Camps in accordance to the details above.

Parent\Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permission for

Off-Site Visit

To be completed when a child is due to visit an off-site facilities during camp.

Child Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent\Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Venue (please circle as appropriate)**:** Sheffield High School \ Kirkham Grammar School

Activity or Visit (please tick as appropriate):

* Swimming at King Edwards Swimming Pool – Clarkhouse Road, Sheffield. S10 2LB
* Swimming at Rural Splash YMCA – Station Road, Kirkham. PR4 2HA

I give my permission for my child to attend the event or activity organized by Kings Camps in accordance to the details above.

Parent or Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_