

## Water Activity Permission Form provided by Kentucky District Royal Rangers

Name of child:	Date of Birth:	Age:
I give consent for (Name of parent/guardian)		
(Name of parent/guardian)	(Name of child	d)
to participate in water activities while at		
	(Name of event)	
I understand that event staff and commanders will:  * Provide life jackets		
• Maintain a safe staff to child ratio while participating in water acti		
<ul> <li>Closely monitor my child and will never leave them unattended w water activities listed below.</li> </ul>	vhile they are participating in th	e
My child may participate in: Please check all that apply  ☐ Tubing and swimming in the river/lake ☐ Canoeing and swimming in the river/lake ☐ Fishing in the river/lake		
My child's swimming abilities: Please check all that apply  ☐ A non-swimmer		
☐ Has successfully completed formal swimming lessons  Describe what level/skills your child has in swimming:		
☐ Has special needs with water activities  Please describe:		
Expiration date of permission form:		
Parent(s) or guardian(s) name:		
Signature of parent/guardian:	Date:	