



Delhi Public School

Palm Beach Marg, Sector 52, Nerul, Navi Mumbai – 400 706

CONSENT FORM

Swimming

NAME _____

CLASS _____

ACTIVITY 1. _____

ALLERGY, IF ANY 1. _____

2. _____

3. _____

FATHER'S NAME _____

MOTHER'S NAME _____

MOBILE NO. (F) _____ (M) _____

I understand that the participation in swimming, comes with the risk of injury and there are risks involved during the training sessions and I agree to accept all the risks existing in the sport in which my child will be participating.

I undertake not to hold the school management, the Principal and any staff responsible or liable for any damages, injury or accident to my ward during the training sessions of the activity.

I hereby give my consent to permit my ward to take part in the above mentioned activity.

Date.....

Father's Signature:.....

Mother's Signature :.....