



**Water Safety / Swimming Permission**

Child's Name: \_\_\_\_\_



**My child can swim.**

I understand that my child will take a swim test consisting of swimming one length of the pool without holding on or stopping and they will also be required to tread water for 30 seconds. If he / she does not pass the swim test, he/she will not be permitted to enter the pool.

**My child can't swim.**

I understand that my child will stay at the school and participate in water day activities. Due to the State of Maryland's child care licensing regulation .41, which states that when water is over a child's chest and the child cannot swim, a one to one ratio for each child who cannot swim must be maintained in the water.

**Summer Sunscreen Use**

Sunscreen is considered by the MSDE Office of Child Care to be a topical medication. Parents who would like for their child to apply sunscreen during our program must complete this form. All sunscreen containers must be clearly marked with the child's name and cannot be shared with other participants, other than their sibling(s).

Brand of sunscreen: \_\_\_\_\_

Specific application instructions: \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian signature

Date

