



Fourth Lane Swimming Club LLC

Independent Arrival Consent Form

Club: Fourth Lane Swimming Club LLC

Contact Information: info@4lsacademy.com

Child's Information:

- Full Name: _____
- Date of Birth: _____
- Swimming Group/Class: _____

Parent/Guardian Information:

- Full Name: _____
 - Contact Number: _____
 - Email Address: _____
 - Emergency Contact Number: _____
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Independent Arrival Consent:

I, _____ (Parent/Guardian Name), hereby give my consent for my child, _____ (Child's Name), to arrive independently at Fourth Lane Swimming Club LLC for their scheduled swimming sessions.

I understand that:

1. My child will be under the supervision of the swimming club's coaches and staff during their session.
2. My child must arrive, sign in and change independently prior to the start of their lesson and once they have finished.
3. The club will contact me or the emergency contact provided if there are any issues or emergencies.



Fourth Lane Swimming Club LLC

I acknowledge that it is my responsibility to ensure my child is fit and healthy to participate in swimming activities and that I have informed the club of any medical conditions, allergies, or special needs my child may have.

Parent/Guardian Signature: _____

Date: _____

For Club Use Only:

- Received by: _____
 - Date Received: _____
 - Notes: _____
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