## **TIDE SWIM MEET PERMISSION SLIP**

Swimmer's Name:	Swim Group:
Email:	
Meet Name:	
Meet Location:	
Meet Date:	Meet Fee:
Preference of Events:	
Please note:	
• All Payments are made to SJFAC (Saint John Fundy A	Aquatic Club)
• The coach will select the swimmer's events.	
• There is set fee for participating in a competition re	gardless of the # of events swum.
• Please put payment, cheque only, & permission slip	o in TIDE box at Aquatic Centre.
has permission to atte	end the
(Swimmer's Name)	(Meet Name)
Swim Meet on (Date).	
(Parent Guardian's Signature)	(Date)