

Panama City Swim Team Travel Consent Form

I/we,	
(Full Name(s) of Custodial and/or Non-Custodial P	
being the lawful custodial parent(s) and/or non-cu	ustodial parent(s) or legal guardian(s) of:
Child's full name:	
Date of Birth:	
has my/our consent to travel with:	
Full name of accompanying person:	
for the purposes of	
during the period of	
Signature:	Date:
(Signature of Custodial Parent, and/or Non-Custod	dial Parent or Legal Guardian)
Full Name:	
Signature:	Date:
(Signature of Custodial Parent, and/or Non-Custod	
Full Name:	