



ELECTIVE PERMISSION FORM

If you wish to participate in any electives that require permission, be sure to complete and return the parent permission form and mail it to: Elective Permission, Camp Tel Noar, 30 Main Street, 2nd Floor, Ashland, MA 01721.

Camper's Name: _____ Grade (as of 9/10): _____

Phone Number: _____ Date: _____

Season 1st Session 2nd Session

WATERSKIING/WAKEBOARDING/KNEEBOARDING PERMISSION: I hereby give my permission for my child to take waterskiing/wakeboarding/knee boarding lessons this summer. I understand that my child must have at least passed the Red Cross Level 3 Swimmer's Ranking and an endurance test to qualify for this program.

Parent/Guardian Signature: _____

Parent/Guardian Name (please print): _____

FITNESS, RUNNING, & SPORTS CONDITIONING PERMISSION: I hereby give my permission for my child to participate in the Fitness, Running, & Sports Conditioning elective this summer.

Parent/Guardian Signature: _____

Parent/Guardian Name (please print): _____

BICYCLING PERMISSION: I hereby give my permission for my child to participate in the bicycling elective this summer, including possible day and overnight trips. Those participating must bring their own bikes, helmets and locks.

Parent/Guardian Signature: _____

Parent/Guardian Name (please print): _____