

## Pre-Camp Swim Classification Record

### Camp Mountain Run

Unit Number: \_\_\_\_\_ Date: \_\_\_\_\_

Full Name	Swimmer Classification		
	Swimmer	Beginner	Non-Swimmer
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Name of Evaluator: \_\_\_\_\_

Evaluator Qualifications: \_\_\_\_\_

Council Name/Agency Name: \_\_\_\_\_

Evaluator Contact Information: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_

Unit Leader Signature: \_\_\_\_\_

Note: When swim tests are not conducted in camp, the Aquatics Director has the right to review and retest participants/scouts to insure adequate swimming ability.