

PERMISSION TO TRAVEL

Student Name _____ email _____
Host Rotary Club _____ Host Parents _____
YE Club Chair _____ email _____

Purpose of Travel: (travel with host family, vacation, Rotary trip etc.)

Itinerary:

Date of departure _____ Date of return _____ Mode of travel _____

If by air, list airlines & flight numbers _____

Name(s), relationship, cell phone # of adult(s) traveling with student:

1. _____ (705) _____

2. _____ (705) _____

Places you will visit _____

Final destination: _____

Provide Following Info On Locations Where You Will Be Staying:

NAME: _____ NAME: _____

ADDRESS: _____ ADDRESS: _____

_____ Postal Code _____ Postal Code

PHONE: _____ PHONE: _____

APPROVALS: (as required - see chart above):

Host Family - Approved yes no

Signature Print Name

YE Club Chair -Approved yes no:

Signature Print Name

Parents -Approved yes no:

Signature-Father Print Name

Parents -Approved yes no:

Signature-Mother Print Name

This form may be completed in counterparts.

When completed, including signatures of persons who must approve, please forward all counterparts to District YE chair for review , approval if required

YE District Chair -Approved yes no:

Signature Print Name

- Not required

Date: _____

If Travel is NOT Approved, the reason is: _____

Following the processing of this form by the District Chair, a copy will be forwarded to both the Youth Exchange Club Chair and the student.

Date sent to YE Club Chair

Date sent to Student