

Permission for Travel	for: Student	's Name				
The Rotary Youth Exchange Program is NOT a travel program. Any opportunity to travel is at the discretion of the Rotary DISTRICT and must be under the direct supervision of the host family, school, church or the hosting Rotary club/district. Direct supervision is accomplished by the physical presence of the supervisor on the trip. A student MUST NOT travel alone or be accompanied solely by other students. The DISTRICT MUST approve all travel outside the boundaries of District 6630. The District is comprised of the following Ohio counties: Ashtabula, Cuyahoga, Geauga, Lake, Medina, Portage and Summit.						
The written permission of the natural parents is required for travel outside the District. Check with the District Chair to see if the parents signed a blanket waiver for travel outside the District. Otherwise, the natural parents must grant permission in writing (an email will suffice), for each trip.						
Note that students and parents have signed documents agreeing to these rules, which include an agreement to come to their host family/district directly and return by a direct route at the end of their experience. If the student is travelling out of the country, special arrangements must be made; Contact the District General Chair or Inbound Chair for instructions at least 60 days before the start date of the out of country trip.						
An exchange student	may be sent home f	or not following these	rules.			
An out of District travel request must be submitted to the District General Chair or the Inbound Chair on the following form:  Complete all applicable sections						
Host Family Name:			Phone:			
Address:	Street		City	State	<u>Zip</u>	
Email:		_ Departure Da	ate:	Return Date:		
Will the student be missing school? ☐ Yes ☐ No If yes, how many days? ☐						
Purpose of Trip:						
Destination/itinerar	y/accommodations	*				
Dates	Where staying? (Fa	amily, Hotel, etc.)	Address, including city/s	tate	Phone # with area code	

<sup>\*</sup>Attach additional sheets if necessary

If traveling by car or van:						
Name of adult driver(s) 21+ years of age:						
Telephone number of adult driver:						
Relation of adult driver to stude	nt and/or Rotary:					
Make and year of car:	License plate #					
If traveling by plane or other comme	rcial carrier:					
Name of carrier:						
Travelling with host family? ☐ Yes	□ No If not, then who?					
If applicable, Name of Organization:						
Chaperone with whom student will travel and relation to student, or Rotary or to the organization:						
Chaperone Address: Street	City S	tate Zip				
Cell #	Email:					
This Request Approved by:	Signature	Date				
Mother	s/					
Father	s/					
School authority's signature (if school will be missed):	s/					
Host Mother	s/					
Host Father	s/					
Host Club YEO / Counselor	s/					

rev 11/22 2

s/

District General Chair or

**Inbound Chair**