

NATURAL PARENT TRAVEL RELEASE

PRIVATE SCHOOL PROGRAM

This form needs to be submitted one week prior to domestic departure, and two to four weeks prior to international departure. Edited or incomplete forms will be considered invalid.

STUDENT INFORMATION			I a	
Student's Legal First Name (No Nicknames)			Student's Last / Family	Name
Student's Home Country		Student's Travel Destination (City, State, and/or Country)		ation (City, State, and/or Country)
Date of Departure from Host Family Community (mm/dd/yyyy)		Date of Return to Host Famil		nily Community (mm/dd/yyyy)
Please select from the following o	options (mark only	one option):		
TRAVEL WITH NATURAL PAR	RENTS			
I am requesting national offi dates outlined above.	ce approval for my c	hild to travel with	me (natural mother	and/or natural father) during the
INTERNATIONAL TRAVEL TO	HOME COUNTRY			
I am requesting national offi	ce approval for my c	hild to travel to th	eir home country du	uring the dates outlined above.
TRAVEL WITH HOST FAMILY	OUTSIDE OF THE U	NITED STATES		
I am requesting national offi	ce approval for my	child to travel with	their host family o	utside of the United States during the
dates outlined above. I ackno	owledge that Nacel C	Open Door is not re	sponsible for advising	ng what type of visa, if any, is required
to travel to another country	with the host family			
TRAVEL WITH AN INDEPEND	DENT PARTY (SCHOO	OL, CHURCH, CLUB,	FRIEND, ETC.):	
I am requesting national of	fice approval for my	child to travel w	ith the independent	t party listed above during the dates
outlined above. I acknowled	ge that the national	office requires the	independent party	to be at least 25 years of age or older
for my child's trip to be appr	oved.			
NATURAL PARENT SIGNATU	RE			
By signing below, I acknowledge that	, for the duration of	my child's trip, I r	elease and hold har	mless Nacel Open Door for any injury
(physical or emotional), loss, delay, or	any other damage o	or expense incurred	d by my child due to	their trip, or my decision to release my
child to travel in the manner indicated	on this form (option	marked above), fo	r any event beyond l	Nacel Open Door's reasonable control,
				ents directly or indirectly caused by
		,,	not limited to: any r	member, guest, employee, or agent o
the host family or Nacel Open Door o	r other persons in the	e host country.		
Natural Parent First Name (Please Print)		Natural Parent Last Name (Please Print)		
Are you the (Circle One)	Natural Parent Signatu	ıre		Date (mm/dd/yyyy)
Natural Father or Natural Mother				