



SPIRAL International Study Tours

Student Registration Packet

Thank you for your interest in SPIRAL International's Study Tour! Please read the following information and sign and date each section.

Your study tour leader will give you a link to our online Registration form. Please fill out the form completely and upload the following documents:

1. Copy of passport information page (make sure there is no glare and all information and photograph are visible)
2. Each signature page of this document

If you have any questions, please contact us at: programs@spiralinternational.org

Parent Permission Form

I hereby give my permission for _____ (*student's name*) to participate in SPIRAL International's Education Tour as described. In case of an emergency, the chaperones have my permission to make decisions concerning my child's medical care as outlined in the consent for medical treatment form.

I understand that should it become necessary for my child leave the group and return home early for personal reasons, I will pay all additional expenses.

Parent/Legal Guardian Signature: _____ Date: _____

Education Tours: Media/Photo Release

SPIRAL International often uses photos, videos and/or interviews of students and adults who participate in our programs on our website and in our publicity materials. Please complete this form to give permission for your child's image or words to be used in this way.

I hereby authorize SPIRAL International to use my child's photo or words in company publications, websites or other publicity materials.

Parent/Legal Guardian Signature: _____ Date _____

Health and Medical Information

It's important that tour leadership is informed of the health and medical background of every traveler. Please inform your tour group leader and SPIRAL International in advance of any of any issues that require special accommodation or attention while on tour. Educational tours in Asia may involve large amounts of walking, stairs, and temperatures and humidity levels beyond what participants may be used to at home.

Please complete all of the information in the online registration form.

As parent/guardian of this student, I assume all financial responsibility for the delivery of such duly authorized care.

Parent/Legal Guardian Signature: _____ Date: _____

Consent for Medical Treatment

As Parent/Legal Guardian(s) of: _____ (*student's name*), I/we hereby authorize SPIRAL International (106 Main Street, Suite 2E, Burlington VT 05401), by and through its representative(s), to act as agent(s) on our behalf in authorizing and consenting to all necessary and appropriate X-ray examinations, anesthetic, medical, dental, and/or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under, general or special supervision of any physician or surgeon licensed to practice medicine. We understand that SPIRAL will make every effort to consult with us and any medical professionals prior to such actions.

It is understood that this authorization, which is valid for the duration of the tour unless sooner terminated, is given in advance of any specific diagnosis, treatment, or hospital care, but is given to provide authority and power to the aforesaid agents and representative to give specific consent to any physician which, in the exercise of their best medical judgment, is deemed advisable and is in the best interest of my child.

Parent/Legal Guardian Signature: _____ Date: _____

Student Conduct Agreement

We hope that this tour will be an outstanding experience! The primary purpose is cultural education and the discovery of a foreign country and culture. Students should consider that they are acting as ambassadors for their school and their nation. As such, respect, exemplary behavior, and good manners are essential for this trip. The purchase or use of drugs, alcohol, tobacco and related items is prohibited.

I, _____, agree to abide by the following rules:

1. I understand that any misconduct will be subject to appropriate action by the chaperones including the possibility of being sent home at my own expense.
2. I agree to follow chaperone instructions at all times for the safety and well-being of myself and the entire school group.
3. I will follow all safety instructions when traveling by bus, plane, vehicle or boat.
4. Once curfew is set each night, I will remain in my room until morning
5. I promise not to drink any alcoholic beverages or use any illegal drugs.

Please sign below if you agree to and support the above rules and statements.

Student Signature _____ Date _____

Parent/Legal Guardian Signature: _____ Date _____

Insurance

We encourage participants to purchase travel protection insurance (at their own expense) as an option to reduce potential loss. The purchase of travel insurance, especially “cancel for any reason” insurance, is time-sensitive and may need to be purchased soon after making the first payment for the trip. These policies can be purchased through a variety of insurance brokers such as insuremytrip.com or insubuy.com.

I acknowledge that I have read and understood this recommendation.

Parent/Legal Guardian Signature: _____ Date _____