ÉCOLE SALISH SECONDARY
ARTS AND CULTURE CLUB
ITALY 2027- **PARENT COMMITMENT FORM (DUE BY APRIL 10th)**

Dear: Parents/Guardians,

_____ is hereby given permission to participate on the **ITALY on Spring Break 2027**. Parents and students are responsible to cover the full cost of the trip. Please ONLY sign form after reviewing EF Tours Terms and Conditions.

Although the ITALY trip is during the school year, it is an extended fieldtrip and that **all students going on the trip must abide by École Salish Secondary School rules and the student code of conduct.** Any student caught using illegal substances like drugs and alcohol, or who engage in disrespectful and dangerous behaviour will result in immediate withdrawal of his/her participation on the fieldtrip and our entire group would have to return home. Additional fees acquired to return home for the entire group will be the responsibility of the student/family at fault. _____ (Student Initials) _____ (Parent Initials)

Prior to registration, admin and counselling will be reviewing the permission forms in making sure the student is eligible to attend this trip. _____ (Student Initials) _____ (Parent Initials)

I, _____ (print student first and last name) agree to abide by Ecole Salish Secondary School rules and the student code of conduct during the **ITALY** Trip 2027. _____ (Student Initials)

I, _____ (print parent/guardian first and last name) have read and understand ALL of EF Tours Terms and Conditions and would like to have the opportunity to register. Terms and conditions can be found www.strujillo.ca under the ITALY 2027 tab. _____ (Parent Initials)

I understand that registration and financial contract will be done directly with EF Tours. Registration information will be sent out once preliminary approval is given by the Surrey School District Superintendents Office.
_____ (Parent Initials)

I understand that the **Student Program Fee** is $4,996 (**Adult Program Fee**: $5,854), which includes the itinerary, gratuities, excursion to Pisa and the Global Travel Protection Plan. _____ (Parent Initials)

I understand that fees **DO NOT include** passport cost, check-in luggage (sometimes included depends on airline), lunch, and spending money per day (depending on spending habits). _____ (Parent Initials)

I understand that the **Requested date of departure** is March 15-22, 2027, and that travel dates may change.
_____ (Parent Initials)

_____	_____	_____
Student signature	Email	Date
_____	_____	_____
Parent signature	Email	Date