

Vernon Secondary School – European Field Trip Application package

Your completed application must include the following:

1. ☐ Application form
2. ☐ Traveler's Agreement
3. ☐ Parent's Understanding
4. ☐ Conditional Acceptance Form
5. ☐ Informed Parent Consent Form
6. ☐ Word processed essay: Why would you make a good participant, what are the benefits of travel, what would you get out of this trip and how would you contribute to the success of the trip? (200 words)
7. ☐ One postdated cheque for \$350. The cheque should be dated for October 1, 2024, and made out to VSS Euro Trip. You will need to set up an EF account and pay through their website once the student's application for participation has been approved.
8. ☐ Application packages must be handed in by October 1, 2024.

Application Form

(please print clearly)

Full Name (as it would appear on your passport):

Second Language currently studying: _____

Current grade: _____ Current age: _____

Gender (as on passport): _____

Do you identify as another gender? If so, please specify:

Name(s) of parent(s)/guardian(s) and contact info

Name:

Telephone:

Street address: _____

Mailing Address (if different): _____

Student's e-mail address: _____

Parent/Guardian e-mail address(es):

Are you a vegetarian or vegan? _____

Allergies (food or other): _____

Vernon Secondary School – Travel Agreement

Traveler's Name: _____

Age: _____

Yes, I am a student in good standing at Vernon Secondary School and am healthy and fit to participate in the trip. I have read and understand the school Code of Conduct and agree to adhere to the principles and regulations therein while on the European field Trip. I acknowledge the authority of all supervising teacher escorts to establish rules for reasons of safety, security, and enjoyment of all participants, and agree to respect and fully comply with these rules. I also acknowledge my responsibility and liability for any consequences arising from my failure to comply with the authority of teacher escorts.

Student Signature: _____

Parent/ Guardian Name(s) _____

Yes, we have read the information package regarding the European Field Trip and have had adequate opportunity to discuss the information with the teacher escorts.

Parent/Guardian Signature(s) _____

Date: _____

Parent's Understanding

Understanding related to:

a) Missing a flight

Since much of the lead time is planned before each flight, a missed flight is not anticipated. However, should this occur, any expenses shall be the responsibility of the parent/ guardian, not the teacher escorts, nor School District No. 22. This would include the airfare of the student and the accompanying adult, along with any hotel expenses. Funds to cover the total cost must be wired immediately to the source of need.

b) Behaviour

If the behaviour of a student is considered to be a problem the parent/guardian will be notified by telephone. If such behaviour is deemed to be unacceptable, the student will be sent home. The full expense for such action will be borne by the parent and the required funds will be sent immediately to the source of need to fly the student and chaperone home. The chaperone will require a return ticket. Please note that travel insurance will not cover such an eventuality.

We anticipate having no such problems. However, you must appreciate the responsibility undertaken by the teacher escorts in supervising a group of students in a foreign country. Teacher escorts must have the authority and the means to take appropriate action. Teacher escorts shall not be held accountable or be responsible for expense or injury arising from failure of a parent/guardian to honour the above conditions.

Teacher escorts: Mr. Rolf Hirschhorn & Mr. Jeff Huggins

Student/Parent/Guardian Name(s): _____

Student/Parent/Guardian Signature(s): _____

Date: _____

Please note that international flights booked for immediate use by EF can cost between \$3,000 and \$5,000 per ticket

SCHOOL DISTRICT NO. 22 (VERNON)
Student Field Trip – Informed Parent Consent

SCHOOL: Vernon Secondary School

STUDENT'S NAME: _____

REGARDING TRIP TO: Europe

PURPOSE OF TRIP: Students to experience first hand the language they are studying

TYPE OF VEHICLE: Airplane, bus and train

DATE OF TRIP March 18, 2026 TO March 29, 2026

These activities, which are approved by the school, will be under the supervision of the school staff or person(s) designated by the Principal. I understand that my child will be required to adhere strictly to the rules and regulations as determined by the school.

I understand that the School District accepts no liability in connection with this activity beyond that which might arise from my child's attendance at school during normal operating hours.

I agree to appoint the teacher or other supervisory personnel – as my agent to engage medical attention or hospitalization if in their consideration, my child requires same.

To the best of my knowledge, other than as noted below, my child has no physical or medical disability that would present any problem on this trip.

THE FOLLOWING TO BE COMPLETED FOR OVERNIGHT AND LONGER TRIPS:

Please list below any allergies or ailments your child is subject to and precautions to be taken:

INFORMED CONSENT

Detailed written description of proposed trip to parents (please attach letter to parents if necessary):

As per parent meeting.

Nature and Scope of Risks Inherent in Activity: Air travel, bus travel, use of public transit, doing daily and tourist activities.

My child is covered by (Please check where applicable)

Medical Insurance

MSP _____ Care Card # _____

EHB _____

Other _____

BC Hospital Insurance Yes _____ No _____

Student Accident Insurance Yes _____ No _____

Emergency contact information (name, relationship and telephone #):

These people must be reachable by phone during the travel time

I hereby voluntarily give my consent to School District No. 22 (Vernon) for my child to participate in the above trip.

Date Signature of Parent or Guardian

Conditional Acceptance

Traveling on the Euro Trip is a privilege, and participants must meet and live by high expectations. Conditional Acceptance is based on information that we presently have. Students must abide by the Code of Conduct and behave in an appropriate manner which indicates commitment to our educational voyage. If a student is unable to comply with our standards prior to departure, they will not be able travel with us.

Since the cost of the trip is set upon enrollment, we must have financial guarantees (i.e. Teacher on Call costs, insurance etc.) as to not cause additional costs to other travelers. If a student chooses not to travel or is no longer in compliance with these standards, they will need to keep the initial financial commitments to the group.

This Conditional Acceptance is based on the approval of Mr. Rolf Hirschhorn and Mr. Jeff Huggins.

Student Name: _____

Student Signature: _____

Parent/Guardian Name(s): _____

Parent/Guardian Signature(s): _____

Date: _____