



Release: non-ISE Family Stay Arrangements

Dear Parent or Guardian,

Please sign this form and return it to ISE as soon as possible.

My son / daughter / ward:

Participant's Name	School	Program Destination
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has my permission to leave the ISE Program for the period of time that his/her group will be staying with ISE host families. I assume complete responsibility for the above-named participant from the time that he/she leaves the group until the time that he/she rejoins the group, including any and all travel arrangements and costs incurred.

I release ISE and the ISE Group Leader from any and all responsibility and liability for the above-named participant for the duration of the time that the participant is away from the group.

Signature of Parent or Guardian

Date

My son / daughter / ward will be visiting:

Name

Address

Phone
