



2875 W Ray RD Suite 6 #355 Chandler AZ 85224

Toll-Free: 1-888-996-2326 Ph: (480) 907-7285 Fax: (480) 907-7526

E-mail: info@ocean-intl.org

Web: ocean-intl.org

TRAVEL AGENDA FORM

Please remember the Fifth Clause of the program rules and regulations, which states the following: *"The participant is prohibited from traveling throughout the continental U.S.A. without adult supervision. To travel with adults other than the host family, the student must first acquire written authorization from the natural parents, host family and appropriate OCEAN's staff. **This must be completed 30 days prior to travel. No exceptions will be made.** We will not approve frivolous travels or travels that are not conducive to a good sojourn, such as visiting family members or friends during holidays and/or school breaks."* **This form is also required if the student is traveling with host family but will be missing school. Students should not pay any fees related to their travels or finalize any travel arrangements until a trip has been pre-approved by OCEAN.**

Student's name: _____

Host Family's name: _____

Phone: (____) _____, _____ E-mail: _____

Address: _____

City: _____ State: _____ Zip Code: _____

1- Who planned the trip? _____

2 -Where are you going _____

3-With whom are you traveling? _____

4- Departure Date: ____J ____J ____ 5- Return Date: ____J ____J ____

6 - Where will you be staying? (Please provide the address and telephone number.) _____

7 - Does your host family agree with your plans? Yes No If yes, please have them sign below.

Host Father's Signature: _____ Date: ____J ____J ____

Host Mother's Signature: _____ Date: ____J ____J ____

8 - Have your natural parents or legal guardians authorized you to travel? Yes No

We, the natural parents agree to allow our son/daughter to participate in the trip outlined on this form. We will NOT hold OCEAN responsible in any way for the health, welfare and safety of our son/daughter. We understand that OCEAN is NOT responsible for any loss or injury suffered by our son/daughter during this trip.

Natural Father's Signature: _____ Date: ____J ____J ____

Natural Mother's Signature: _____ Date: ____J ____J ____

9 -Will you be absent from school? D Yes D No

If so, have you notified the school of your absences? D Yes D No

If you will be absent from school, we must receive written approval from a school official:

School Official's Name and title: _____

School Official's Signature: _____ Date: __J __/ __

10- Have you informed your area representative of your plans? D Yes D No If yes, please have him/her sign below.

Area Representative's name: _____

Area Representative's Signature: _____ Date: __J __/ __

I understand that I must acquire permission from OCEAN's main office in Arizona before making any of my travel arrangements. I also understand that traveling without receiving approval from OCEAN prior to my departure could result in my early dismissal from the program.

Student's Signature: _____ Date: __J __/ __

Please return this form to: OCEAN
2875 W Ray RD Suite 6 #355 Chandler AZ 85224

Toll-Free: Phone: 1-888-996-2326
Fax: (480) 907-7526
E-mail: info@ocean-intl.org

MAIN OFFICE USE ONLY:

Option #1:

OCEAN **approves** of the trip outlined on this form and grants the student permission to travel.

Director's Name: _____ Title: _____

Director's Signature: _____ Date: __J __/ __

Option #2:

OCEAN **does NOT approve** of the trip outlined on this form. The student is NOT authorized to participate in this trip. If he/she chooses to participate in this trip without the required authorization, he/she may be dismissed from the program and returned to his/her homecountry.

Director's Name: _____ Title: _____

Director's Signature: _____ Date: __J __/ __