



Adventure Wise Trips & Tours

EXPLORE THE WORLD WITH US

Parent Consent Form

One form per student. Return it signed with the US\$250 deposit. A seat is held only when we have both.

1. The trip

TRIP (E.G. ORLANDO, FLORIDA)

DATES

SCHOOL

GROUP LEADER (TEACHER)

2. The student

FULL NAME (AS ON PASSPORT)

DATE OF BIRTH

GRADE / FORM

PASSPORT NUMBER

PASSPORT EXPIRY

3. Parent or guardian

FULL NAME

RELATIONSHIP TO STUDENT

MOBILE PHONE

WHATSAPP (IF DIFFERENT)

EMAIL

HOME ADDRESS

4. Second emergency contact

FULL NAME

RELATIONSHIP

PHONE

5. What I agree to

- ☐ My child may travel on this trip with the Adventure Wise team and the school chaperones.
- ☐ I have read the Terms of Service and the Refund & Cancellation Policy at adventurewise.com.
- ☐ My child will follow the school code of conduct and the trip rules. If my child puts others at risk, they may be sent home with a chaperone at my cost, after the team has spoken with me.
- ☐ In an emergency, if I cannot be reached, the trip leader may agree to medical treatment a doctor says is needed.
- ☐ I will fill in the Medical & Allergy Form and tell Adventure Wise about any change before the trip.

6. Photos

We share trip photos in a private parent album. Instagram photos only show students whose parents say yes.

- ☐ Yes, photos of my child may be shared on Adventure Wise social media.
- ☐ No, private parent album only.

7. Payment plan

- ☐ I will pay in full by the due date.
- ☐ I will use the monthly payment plan shown on the trip page (no interest).

8. Signature

PARENT / GUARDIAN SIGNATURE

DATE

STUDENT SIGNATURE (AGE 12 AND OVER)

DATE

Office use: received _____ · deposit ref _____ · checked by _____