

**2.8 UPDATE TO PREVIOUSLY APPROVED OVERNIGHT FIELD TRIP REQUEST FOR WHS STUDENT EXCHANGE TO MADRID, SPAIN MAR 20-APR 3, 2027**

**A. SUBJECT**

At the January 27, 2026 Board of Education meeting, the Board was asked to approve an overnight field trip for Woodstock High School students to participate in a school to school exchange with Colegio Amanecer in Madrid, Spain March 20-April 3, 2027. Since that time, it has become necessary to revise the travel dates due to unforeseen circumstances. The revised dates of travel are now June 5-June 19, 2027.

**B. SUGGESTED MOTION**

This item will be included as part of the Consent Agenda Motion.

**WOODSTOCK COMMUNITY UNIT SCHOOL DISTRICT NO. 200**

**OVERNIGHT STUDENT TRAVEL REQUEST FORM**

Athletic/Club Name:

Spain Exchange 2027

Name of Event and Description:

School to School Exchange WHS & Colegio Amanecer

Foreign exchange program. Students will host Spaniards as well as stay with Spanish families while abroad

Coach/Chaperone Name(s):

Bronté Borter (Organizer), Kasey Kruckenberg (Lead Chaperone) + 1 other teacher chaperone

Date(s) of Activity:

June 5- June 19, 2027

Location of Activity:

Madrid, Spain

Number of Students:

Male: 7      Female: 7      Total: 14

**Applicable Costs:**

Gas/Mileage:	=	\$	-
Entry/Reg Fee: Includes fee for Greenheart Travel, flights, medical & trip insurance	=	\$	2,300.00
Lodging: \$ - per night # of nights 15 # of Rooms 0	=	\$	-
Meals: \$ - per day # of days 15 # of Students 14	=	\$	-
Tolls:	=	\$	-
Misc.		\$	300.00
Sky Deck \$60/student			
Cubs			
Game \$60/student			
Metra &			
CTA \$40/student			
Travel			
Ins. \$100/student			
Excurs.			
in			
Madrid \$40/student			
Transportation: D200 bus to transport Spaniards to O'Hare airport	=	\$20/student	
			Not to exceed
		<b>TOTAL</b>	<b>\$2,700</b>

**Detailed Trip Itinerary:** The Spain Exchange Program offers our students an authentic and meaningful learning experience with their Spanish language study. Our students are fully

immersed into the culture and are challenged to use the language in authentic contexts. Additionally, we host the Spaniards in the fall and they host us in the Spring. As a result, our students and families create lifelong relationships with each other.

Above Costs to be Paid By (Including % paid by fundraising):

Students' families to cover the cost of the program - both hosting and traveling

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Account # (if applicable): Spain Exchange

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Submitted By: Brontë Borter 3/30/2026  
Date

Approved By: Art Vallicelli 4/6/2026  
Date

Principal's Signature

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board Meeting Approval Date (if applicable)

## **Appendix A: Tour Proposal and Detailed Itinerary**

**Trip Leader:** Brontë Borter

**Trip Location:** Madrid, Spain

**Trip Name:** Spain Exchange 26-27

**Trip Dates:** June 5 - June 19, 2027

**Students:** To Be Determined (TBD)

**Trip Plan:** (Narrative: Lead Chaperone's experience with trips, The "Why")

- The Spain Exchange Program offers our students an authentic and meaningful learning experience with their Spanish language study. Our students are fully immersed into the culture and are challenged to use the language in authentic contexts. Additionally, we host the Spaniards in the fall and they host us in the Spring. As a result, our students and families create lifelong relationships with each other.

**Trip Objectives:** (What do you plan for your students to accomplish, and what learning standards do it relate to)

- We intend to strengthen our students' four modes of communication (Reading, Listening, Writing, and Speaking) in Spanish. We also aim to expand the students' cultural awareness and make lifelong connections with others around the world.

**What is the per-student cost?**

- **What is Included?**
  - Transportation, airfare, room and board, daily activities (ie. museum entrance fee, excursions).
- **What is Not Included?**
  - Personal purchases (ie. souvenirs)

**Describe your Travel Protections Plan (Insurance):** (Travel insurance is required for all students. Cancel for any reason.)

- We will purchase the group travel insurance through iTravelInsured which covers cancellations and interruptions (including: sickness, injury or death of insured, a family member, a travel companion, a business partner, a child caregiver, service animal or pet), delays, and emergency situations.

**Detailed Itinerary:**

- Linked is the itinerary from the 24-25 exchange. Each year, we typically do the same and sometimes there are minor changes. This calendar provides a great overview of what we will do next year. The calendar will be finalized closer to departure and is dependent on our host school.

## **Appendix B: Frequently Asked Questions**

### **TRIP DETAILS**

When will I receive our final itinerary?

- You will receive a preliminary itinerary at the informational parent meeting. You will receive the final itinerary at the pre-departure meeting parent & student meeting, which will take place about 30 days prior to departure.

Can I change my reservation (room occupancy, etc.)?

- Not applicable

How many adults or chaperones will travel with my child?

- 2 teacher chaperones

Are parents allowed to attend the exchange?

- No

What if the weather is inclement?

- We will work with airlines to reschedule any delays.

### **EMERGENCIES**

What happens if my child has a medical emergency while on the exchange?

- Students and/or host family/student should notify the chaperones. If a hospital visit is necessary, one of the chaperones will accompany the student.
- All participants in the program are covered by medical and accident insurance. Greenheart Travel will provide an insurance booklet explaining the coverage and benefits to the coordinator via email. Coordinators should share the details of the coverage with participants and their families. Insurance cards will also be sent to the coordinator for each participating US student with the emergency contact numbers for the insurance company listed.
- The participant's natural parents have signed a document giving Greenheart Travel staff, representatives and host parents' permission to seek medical treatment for the exchange participant. This should be shared with medical personnel. Coordinators should carry these documents with them at all times and should give a copy to the host families.
- In the event that a student needs to visit a doctor while abroad, they may need to pay for the doctor's visit at the office. Claims should be filed within two weeks of the doctor's visit. Submit the original claim form along with the original receipts (doctor and pharmacy) to the insurance company. Be sure to make copies of the claim form and all receipts for your own records.

- For after-hours emergency assistance within the U.S., please first attend to the safety and well-being of the student, then call the emergency number of the Greenheart Travel Chicago Office toll free at: 888-726-8508 (toll free) 217-241-8508 (from outside US). For assistance during business hours: 1.888.227.6231 Or via email: [travelapplications@greenheart.org](mailto:travelapplications@greenheart.org)
- It is also important to notify the Greenheart Travel as soon as possible in the event of any problems or emergencies with any of the students while they are on the program.

What if I have an emergency and need to reach my child?

- The trip chaperones will have access to their phones and emails while abroad. The students will also be able to have their phones on them throughout the trip.

### **HOTEL/ACCOMMODATIONS**

On overnight trips, how many students will be in each hotel room?

- Students will be staying with host families.

Who determines the hotel rooming arrangements?

- Students complete applications and best matches are made based on this information.

### **INSURANCE**

What is the Travel Protection Plan?

- The Travel Protection Plan is included in the total cost of the trip. Copies of this plan will be provided at the informational meeting or upon request.
- We will purchase the group travel insurance through iTravelInsured which covers cancellations and interruptions (including: sickness, injury or death of insured, a family member, a travel companion, a business partner, a child caregiver, service animal or pet), delays, and emergency situations.

### **PAYMENT AND REGISTRATION**

How do I make payment for my child's trip?

- Payments can be made via cash or check (payable to Woodstock High School) in the main office at WHS.

Is it ok if my payment is late?

- While it is not ideal to make late payments, please communicate with the program leader if a payment will be late and inform them of when the payment will be made. The final balance must be paid 90 days prior to the date of departure in order for the student to attend the trip.

Do you send out payment reminders?

- The program leader will send out payment reminders via email when the dates are approaching.

How do I register for a tour?

- Not applicable

How do I complete the Permission for Medical Treatment form online?

- This form should be completed and returned in paper form, not online.

What happens if not enough participants sign up for the exchange by the initial deposit date?

- Your deposit will be refunded in full.

If my school is fundraising, how will I know how much my child has earned?

- Not applicable

Can I make subsequent payments online if I have mailed in the first deposit?

- No

Can I pay with a credit card over the phone?

- No

### **CANCELLATIONS**

How do I cancel my child from an exchange?

- Please notify Brontë Borter, program leader, of intended cancellation. However, once the tickets have been booked, it is very difficult and often expensive to make changes. Please remember that this is an exchange and canceling participation reduces the experience of the Spanish student who your child was already matched with. Greenheart Travel and Woodstock High School are not responsible for any expenses incurred as a result of cancellations or changes to tickets. Full refunds are not guaranteed, it depends on the circumstances. There will be trip cancellation insurance that will cover the flight fees, but not the entirety of the trip.

### **MEDICATIONS AND SPECIAL NEEDS**

What if my child has medications or allergies or is on a special diet?

- Each student will need to submit the necessary medical forms. The student, parent, caseworker, and teacher will communicate about how that student's needs can be met.

What if my child has special needs?

- The student, parent, caseworker, and teacher will communicate about how that student's needs can be met. We will work together to ensure that the student can participate in all trip activities as best as they are able.

### **PACKING**

Is my child allowed to bring a cell phone or other electronic devices?

- Yes

How much money will my child need to bring on the exchange?

- The only money required during the trip is for souvenirs. All room, board, travel, and activities are provided by program cost.

## **Appendix C: Payment Plan**

### **Payment Plan for Spain Exchange Trip 26-27**

There are three installments for the trip:

1. April 16, 2026 → Deposit \$350 (non-refundable)
2. October 1, 2026 → \*\*Approx. \$1,175
3. December 3, 2026 → \*\*Approx. \$1,175

\*\*TBD: At the moment, the exact cost for the last two payments is not set. Once the final cost of the trip is set, the balance is spread over the two payments. However, the estimated cost is not to exceed \$2,700.

## **Appendix E: Travel Protection Information**

(Describe the student travel insurance, cancellation policy, and cost per student.)

We will purchase the group travel insurance plan (Plan Name: Travel GT) through [iTravelInsured](#) which covers cancellations and interruptions (including: sickness, injury or death of insured, a family member, a travel companion, a business partner, a child caregiver, service animal or pet), delays, and emergency situations. The anticipated cost of the insurance is \$60 per student. Full details on plan coverage can be found [here \(Travel GT brochure\)](#).

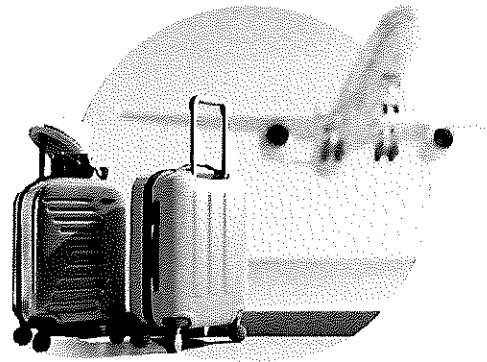


Travel Insured<sup>®</sup>  
**TRAVEL GT**



20240812-3773624

# GLOBAL TRAVEL INSURANCE *solutions*



The iTravellInsured Travel GT plan is designed for individuals traveling in groups seeking to protect their trip investment against trip cancellation and trip interruption. With iTravellInsured Travel GT you may recover non-refundable, unused payments and deposits when a trip is cancelled or interrupted for a variety of covered reasons. Benefits are also provided for travel delays, baggage delays, and emergency medical treatment while you're away from home.

Separate from these benefits, IMG can provide non-insurance emergency travel assistance, such as helping you replace lost travel documents or lost prescriptions, emergency cash transfers, and legal and medical referrals when necessary.

## CANCELLATIONS AND INTERRUPTIONS

Sometimes life happens and you have no choice but to cancel a trip or end it early. Trip Cancellation and Trip Interruption benefits allow you to recover non-refundable, unused payments and deposits made toward your trip when it is cancelled or interrupted for a covered reason.

## DELAYS

When your trip is delayed and a covered reason keeps you from using your originally booked accommodations, trip delay benefits can help reimburse you for the extra expenses.

## LOST OR DELAYED LUGGAGE

Airline lost your baggage? Luggage stolen while under the care of your hotel? The Baggage and Personal Effects benefit can reimburse you for personal items lost, stolen, damaged or destroyed during your trip. If your checked baggage is delayed for a certain number of hours on the way to your destination, Baggage Delay benefits provide reimbursement for the cost of necessary personal items like clothing and toiletries you need to purchase while waiting for your bags.

## EMERGENCY SITUATIONS

When the unexpected happens, IMG's team is available 24/7. Our Non-Insurance Emergency Travel Assistance Services include emergency travel arrangements, medical referrals, lost passport/travel documents assistance, emergency prescription replacements, emergency translations, legal referrals and more.

## MEDICAL EXPENSES

Nobody plans to get sick or experience a medical emergency on vacation, but unfortunately, it can happen. That's why iTravellInsured plans offer coverage for accident & sickness medical expenses and emergency medical evacuations.

*iTravellInsured plans are designed to address many of the issues you may encounter while traveling.*



All coverages are subject to additional terms and conditions; please review the plan document for full details.

# The **IMG**<sup>®</sup> Advantage

*Our Service, Strength, and Safety Solutions provide you with the ultimate advantage: Global Peace of Mind.*

## SERVICE *Help when and where you need it.*

Nobody wants to experience an emergency while traveling the world, but if you do, you'll want a team you can trust to have your back. IMG's expert staff is here for you 24/7. We're accustomed to working in multiple time zones, languages, and currencies, so rest assured we have the training to assist you—even in remote and hazardous locations. Our international and U.S. provider networks include more than one million physicians and facilities across the globe, giving you access to quality care while away from your primary care team. Our innovative technology allows you to manage your claims, your account, and search for providers through our online portal and mobile app around the clock.

## STRENGTH *A market leader you can trust.*

You can feel confident with IMG knowing our industry expertise has led us to serve millions of customers worldwide since 1990. Owned by SiriusPoint, a multi-billion-dollar insurance industry leader and rated "A-" by A.M. Best, an independent analyst of the insurance industry, IMG has a strong financial backing and vision to become the preeminent provider of travel and health safety solutions. With loyal customers ranging from Fortune 500 companies, universities, to individuals and other insurance companies, our personalized offerings allow us to meet the needs of nearly anyone traveling internationally.

## SAFETY SOLUTIONS *Products and services designed with your safety in mind.*



### PHYSICAL HEALTH

You can't plan when you get sick, and unfortunately, it can happen anytime and anywhere. Medical bills can be expensive, and IMG plans provide the cross-border accident & sickness medical expense coverage you need for unexpected medical care.



### CRISIS SUPPORT

Navigating an emergency in a foreign country is never easy. That's why IMG offers a multilingual staff of nurses, doctors, and case managers that provide 24/7 non-insurance assistance services to facilitate a response to urgent and emergency situations, such as evacuations.



### FINANCIAL PROTECTION

Traveling the world isn't free. When life happens, no one wants to lose out on both the trip of a lifetime and your trip investment. IMG plans offer coverage for your prepaid trip costs, to ensure that when a covered event happens – you can be reimbursed for some of those nonrefundable payments made to book your trip.



### PERSONAL PROPERTY

There are some belongings you know you can't live without. IMG has you covered and can help assist you with lost or stolen travel documents like a passport or visa, and can reimburse costs if your essential items like luggage are lost, stolen, or damaged during your travels abroad.



# iTravellnsured Travel GT

The iTravellnsured Travel GT plan is specially designed for individuals traveling in groups to destinations worldwide.

FINANCIAL PROTECTION  
CRISIS SUPPORT  
PERSONAL PROPERTY  
PHYSICAL HEALTH

Benefits & Services	Maximum Benefit Amount
Trip Cancellation	100% of the non-refundable insured trip cost
Trip Interruption	125% of the non-refundable insured trip cost
Trip Delay	Up to \$150 per day per person (\$600 max per person)
Missed Trip Connection	Up to \$500 per person
Medical Evacuation and Repatriation of Remains	Up to \$100,000 per person
» Return Transportation	Included
» Transportation of Children/Child	Included
» Bedside Visit Transportation to Join You	Included
Baggage and Personal Effects	\$1,500 (\$250 max per item)
» Replacement of Passport, Visa, or Other Travel Documents	Included
Baggage Delay	Up to \$200 per person
Accident & Sickness Medical and Dental Expense	Up to \$25,000 per person
» Dental Expense Sublimit	\$1,000 per trip



Based on your state of residence, some plan benefit names above may not match your plan documents. While every effort was made to align terminology for consistency, please refer to the sample wordings for all defined terms. Please check your plan documents for specifics.

## PLAN SPECIFICS



### TRIP CANCELLATION & TRIP INTERRUPTION – WHAT'S COVERED?

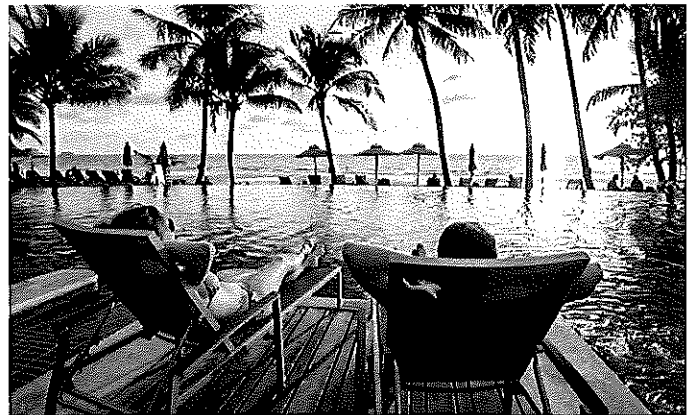
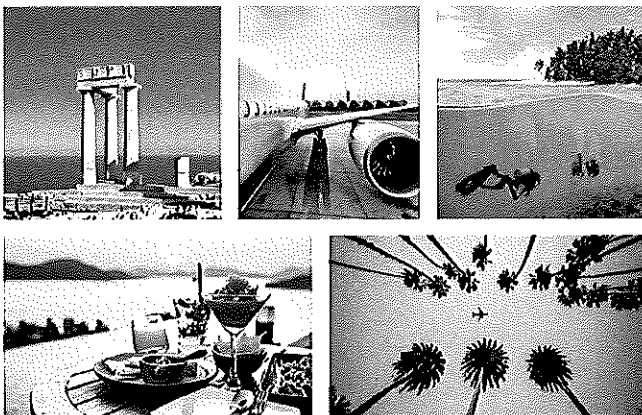
Here are a few examples of covered events that would trigger a trip cancellation or trip interruption benefit. Please note the listed perils are not all applicable to both trip cancellation and trip interruption and may vary based on your state of residence; refer to the plan document, which is sent upon purchase, for complete details. Additional terms apply to every peril.

- » Sickness, injury or death of insured, a family member, a travel companion, a business partner, or a child caregiver
- » Primary residence or destination being rendered uninhabitable
- » Documented theft of passports/visas
- » Involved in a merger, job loss or job relocation
- » Documented traffic accident
- » Unannounced strike
- » Inclement weather that causes delay or cancellation by your common carrier
- » Mechanical breakdown of the common carrier
- » Natural disasters, mandatory evacuations
- » Emergency military duty for national disaster
- » A terrorist incident
- » Revoked military leave
- » Bankruptcy or default of an entity that directly provides travel arrangements
- » NOAA hurricane warning or watch at destination
- » Court order to appear as a witness
- » Jury duty
- » Hijack

### NON-INSURANCE EMERGENCY TRAVEL ASSISTANCE SERVICES

After purchasing the iTravelInsured GT plan you will have 24/7 access to IMG's world-class customer service while on your trip, including the following emergency travel assistance services designed to give you Global Peace of Mind

- » Emergency travel arrangements
- » Medical referral
- » Lost passport/travel documents assistance
- » 24-hour medical monitoring
- » Lost luggage assistance
- » Emergency cash transfer
- » Embassy or consulate referral
- » Legal referrals
- » Emergency message relay
- » Emergency translations
- » Emergency prescription replacement





iTravelInsured®  
TRAVEL GT



iTravelInsured Insurance Services CA Non-Resident Producer License No. 0F17093

*Anyone looking to obtain information regarding the features and pricing of each travel plan component, please contact your licensed producer or apply online.*

### Contact Information

Please visit [www.imglobal.com/travel-insurance](http://www.imglobal.com/travel-insurance) and review the specific plan document for your state.

You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this plan with your existing life, health, home, and automobile insurance policies. If you have any questions about your current coverage, call your insurer or insurance agent or broker.

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## **Appendix F: Woodstock District 200 Field Trip Chaperone Expectations**

### **CHAPERONE DUTIES AND EXPECTATIONS WILL INCLUDE BUT ARE NOT LIMITED TO:**

1. Responsible for an assigned group of students throughout the planning and execution of the trip.
2. Attendance at any pre-trip chaperone meetings and meetings during the trip will be expected.
3. Compile an emergency contact list and communication plan for the assigned group.
4. Required to attend all planned functions during the trip.
5. Responsible for getting assigned groups to specific locations on time.
6. Responsible for assuring students have all the required items needed for the day's events.
7. Work in shifts with other chaperones including supervision during all daytime activities as well as potential nighttime hotel hallway/room monitoring.
8. Assist with bus loading and attendance.
9. Assist with equipment loading, unloading, and handling as needed.
10. Assist with any snack and meal preparation, serving, and clean-up as necessary.
11. **NO CHAPERONE WILL ISSUE DISCIPLINE TO A STUDENT.**
12. Report all problems to the Lead Staff Chaperone.
13. **NO SMOKING, CONSUMPTION OF ALCOHOL OR USE OF ILLEGAL SUBSTANCES WILL BE ALLOWED BY ANY CHAPERONE DURING THE TRIP.**

## Appendix G: D200 Field Trip Medication Form

### Woodstock Community Unit School District 200

Dear Parent/Guardian,

If your student will need to take prescription or over-the-counter medication during the International/overnight field trip, please complete the **D200 Field Trip Medication Form** with your student's physician. A physician's order is required for all prescription or over-the-counter medication that your student may need during the trip (ie. if your student has a headache, the **D200 Field Trip Medication Form** is required before medication can be administered). The **D200 Field Trip Medication Form** needs to be turned in to the trip sponsor four weeks before departure for the trip. It will be held by the trip sponsor during the trip for safety purposes. Students may carry and self-administer a prescribed asthma inhaler or epinephrine auto-injector device if the permission to self-carry is indicated by your physician. The **D200 Field Trip Medication Form** is below for your reference. If you have any questions, please call the trip sponsor or your School Nurse.

Sincerely,

District 200 Health Services

# D200 Field Trip Medication Form

## Health Services

Guidelines for the administration of prescription or non-prescription medication to students attending a school-sponsored activity or field trip (including overnight trips) will follow District 200 Board Policy 7:270, *Administering Medicines to Students*. As the school nurse does not usually accompany students on trips, the student's teacher or other designated school employee will be responsible for medication storage and administration. Illinois School Code (105 ILCS 5/22-30) and District 200 Board Policy permits students to carry and self-administer specific medication deemed necessary for life-threatening conditions provided the student's parent has completed and submitted the appropriate Request for Self-Administration of Medication\*\* form in addition to this form. (Medications that can be carried and self-administered include asthma inhalers and epinephrine). **Students may NOT carry or self-administer medications other than asthma inhalers and/or epinephrine.**

The parent must complete and submit this form to the school health office prior to departure of the trip. Medication must be provided in the original container clearly labeled with the child's name, name of medication, dosage, and possible side effects. Medication supply should coincide with the number of doses needed for the duration of the trip and **must** be dropped off to the school health office by a parent or other responsible adult.

\_\_\_\_\_  
Student's Name (Please Print)                      Birthdate      Grade                      Teacher or Activity Sponsor's Name (Please Print)

**MEDICATION(S) AND INSTRUCTIONS:** The following medication(s) will be stored and administered by the student's teacher or other designated school employee. \*For emergency medications (inhalers, EpiPens), please clearly write out specific instructions on when to administer, how to administer, and what to do after administration.

Prescription Medication                       Non-Prescription Medication                       Student to Carry / Self-Administer\*\*

Name of Medication: \_\_\_\_\_

Dosage: \_\_\_\_\_ Time(s) to Be Given: \_\_\_\_\_

\*Emergency Medication Instructions: \_\_\_\_\_

\_\_\_\_\_  
 Prescription Medication                       Non-Prescription Medication                       Student to Carry /Self-Administer

Name of Medication: \_\_\_\_\_

Dosage: \_\_\_\_\_ Time(s) to Be Given: \_\_\_\_\_

\*Emergency Medication Instructions: \_\_\_\_\_

\_\_\_\_\_  
Name of Physician (Please print): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Date

I authorize Woodstock Community Unit School District 200 and its employees and agents, to administer the above medication(s) or to permit my child to carry and self administer\*\* as directed by the physician. I agree to indemnify and hold harmless Woodstock Community Unit School District 200 and its employees and agents against any claims, except a claim based on willful and wanton conduct, arising out of the administration of medication to my child **and/or** my child's self administration of medication. I also give my permission to Woodstock Community Unit School District 200 and its employees and agents, to contact the physician in regard to any medication questions or concerns.

Parent's Name (Please Print): \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

Work / Cell Phone: \_\_\_\_\_

Date \_\_\_\_\_

# Appendix H: WCUSD200 Student Field Trip Permission Form

Woodstock Community Unit School District 200 - Woodstock, IL 60098

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Father: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mother: \_\_\_\_\_ Phone: \_\_\_\_\_  
Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of last tetanus booster: \_\_\_\_\_

Student Health Insurance coverage for accident and/or medical is provided by:

Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Allergies/Health Concerns: \_\_\_\_\_  
\_\_\_\_\_

Current Medication (indicate medication, dosage, and times to be taken): \_\_\_\_\_  
\_\_\_\_\_

## Release and Waiver, Affidavit of Insurance Coverage, and Agreement regarding Student Conduct on Educational Tour/Field Trip

I/We \_\_\_\_\_, the parents or legal guardians of \_\_\_\_\_, a minor in Woodstock Community Unit School District No. 200 (hereafter "School District"), McHenry County, Illinois (hereafter "student"), in consideration of the agreement by the School District to permit the student to participate in the educational tour/field trip (hereafter "trip") to take place from \_\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_, do hereby swear and affirm that there is accident and health insurance coverage for our student that will cover him/her while participating in the said trip, and that we agree to maintain such coverage in full force and effect for the duration of the trip.

I/We do further agree to release, indemnify, protect, and hold harmless said School District, its Board members, officers, supervisors, agents, servants, employees, and all private persons or organizations volunteering services without charge to supervise or chaperone students while on the trip from any claim or liability whatsoever, including, but not limited to, personal injury, property damage, court costs, attorneys' fees, and interest, whosoever caused, as a result of the student participating in the above-described trip.

I/We do further agree that the Board of Education, its officers, agents, and/or employees reserve the right to terminate the participation of the student for failure to behave and act in accordance with the School District Regulations on Conduct, for failure to follow the instructions and directions of the tour supervisor(s) and/or chaperones, or for failure of the student to act or conduct him/herself in a manner that is compatible with the interest, harmony, comfort or welfare of the trip as a whole as determined by said Board, its officers, agents and/or employees. If the student's participation is terminated, I/we understand that the cost of the trip may not be refunded, and the student will be sent home at our expense.

I/We do further agree that in the event of an accident or illness to our son/daughter/ward occurring from the commencement to the end of the trip. If we cannot be immediately contacted, we hereby authorize the School District personnel to arrange for the transportation of our son/daughter/ward, whether by ambulance or otherwise, to a proper facility where emergency medical treatment would normally be administered including, but not limited to the emergency room of a hospital, doctor's office, or medical clinic. We further authorized such personnel to sign releases as may be required to obtain immediate medical or surgical treatment as is required in the judgment of medical authorities at said facilities.

## Appendix H: WCUSD200 Student Field Trip Permission Form

Student medication during an international/overnight field trip is kept under the supervision of the District 200 lead staff chaperone. Student medication will be administered by the District 200 lead staff chaperone according to the physician's order(s) that is documented on the District 200 overnight trip medication authorization form that is submitted by the parent/guardian. All medications to be taken during the educational tour/field trip must be brought to the School Nurse at least two weeks before the trip's departure, along with the overnight trip medication authorization form completed by the parent/guardian and physician.

I hereby request and grant permission for District #200 school personnel to dispense medication to my student, according to Doctor (name) \_\_\_\_\_ Instructions during the field trip. I further waive any claims against the School District, its employees, and agents arising out of the administration of said medication and agree to hold harmless and indemnify the School District, its employees, and agents, either jointly or severally, from and against any and all liability, claims, demands, damages, or causes of action or injuries, costs, and expenses including attorney's fees, resulting from or arising out of the administration of medication.

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Notary Seal

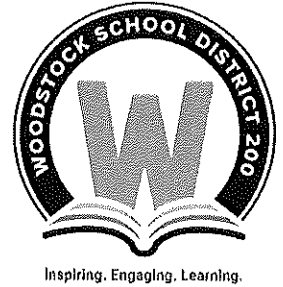
## Woodstock High School

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Art Vallicelli, EdD, *Principal*  
John Liuzzi, *Assistant Principal*  
Cara Vandermyde, *Assistant Principal*  
Al Baker, *Athletic Director*

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Dear Parents or Guardians,

The WHS World Languages Department is organizing an exchange trip to Spain for the 2026-2027 school year, provided by Greenheart Travel. School-to-School Exchanges give you the opportunity to discover another culture through first-hand experience. By going beyond the classroom, students will be immersed in another language, culture, family, and lifestyle—gaining more than they ever could from a textbook. High school exchanges are typically many students' first step toward extended stays abroad and long-term language fluency (Greenheart Travel).

Our specific program is paired with the school Sagrado Corazón in Madrid, Spain. Because this is an exchange, students are paired with another student from the partnering school, and their families (you) host this student. First, the Spaniards will come here to Woodstock in the fall (August/September), and we will travel to Madrid, Spain in the Summer (June). Matches are made by the end of the current school year, and your exchange student will visit your home for 2 weeks, attend classes, participate in scheduled cultural activities, and participate in family activities on weeknights and weekends. The same will happen when we travel to Madrid. Students will partake in field trips during the school day while the Spaniards visit, but they will not miss any school while abroad.

This program is eligible to students taking their third or fourth year of Spanish in high school, are in good academic standing, and have no disciplinary issues with the school. Space in the program is limited. The estimated cost for this year's program is \$2,700. **Student applications and non-refundable deposits of \$350 will be due April 16th, 2026** – once the final cost is set, the balance is spread over two payments due fall 2026.

To learn more about this exchange, please join us for our **mandatory informational meeting on April 1st, 2026 at 6:30pm in the LRC**. We will go over the program, expectations, and cost in detail. This meeting is mandatory for all interested students and parents. You can also see this program at a glance on the back.

If you have any questions regarding the field trip, please contact me at [bborter@weusd200.org](mailto:bborter@weusd200.org).

Thank you,

Brontë Borter & Kasey Kruckenberg  
Program Organizer & Program Chaperone