PARENTAL CONSENT FORM

LANGUAGE IMMERSION STAY FOR A MINOR PARTICIPANT

CAVILAM ALLIANCE FRANÇAISE

PLEASE SEND THE DOCUMENT TO US BY EMAIL AT: info@cavilam.com

KEEP A COPY OF THIS DOCUMENT

1. PARTICIPANT AND LEGAL REPRESENTATIVE

I, the undersigned,

Mr. / Mrs.:

Parent / legal guardian of the child:

Surname:

First name:

☐ Boy ☐ Girl Date of birth: __ __ / __ __ / __ __ __ __

Nationality:

Hereby give my consent for him/her to participate in the language and cultural immersion program organized by CAVILAM – Alliance Française, from __ __ / __ __ / __ __ __ __ to __ __ / __ __ / __ __ __ __

2. SUPERVISION

CAVILAM – Alliance Française ensures educational supervision of participants during French language classes provided by its teaching staff.

Outside supervised French class hours, including in particular:

- breaks between classes,
- meal times,
- unsupervised travel,
- optional activities or excursions offered by CAVILAM – Alliance Française,

the participant remains under the responsibility of the parent / legal guardian. Under no circumstances shall CAVILAM – Alliance Française be held liable.

3. HOMESTAY

The host family is responsible for the participant only when he or she is present in their house. The family undertakes to provide a safe environment in accordance with the commitments set out by CAVILAM – Alliance Française.

4. CONSENT FOR OUTINGS

☐ I give my consent for my child to go out unsupervised.

☐ I do not I give my consent for my child to go out unsupervised*

If authorized: Please specify the permitted days and times *(for example: Sunday to Thursday until 7:30 p.m., Friday and Saturday until 10:30 p.m.)*

**The rules regarding supervision and the liability of CAVILAM – Alliance Française and the host family, as defined in sections 2 and 3, remain applicable.*

1, avenue des Célestins - 03200 VICHY - France - +33 (0)4 70 30 83 83 - info@cavilam.com - www.cavilam.com

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5. TRANSPORTATION

Transportation provided by the host family or by local transport companies partnering with CAVILAM – Alliance Française for optional excursions is carried out with all necessary care and vigilance.
However, parents acknowledge the inherent risks associated with any travel and accept that CAVILAM – Alliance Française cannot be held liable in the event of an incident.

6. INSURANCE

The parent / legal guardian confirms that the child has insurance covering at minimum:

- Medical and hospitalization expenses
- Repatriation and medical transport
- Personal liability insurance

7. MEDICAL CARE AND EMERGENCY CONTACT

In the event of an emergency, I authorize CAVILAM – Alliance Française and/or the host family to act on my behalf and take any necessary measures to ensure my child's health, including:

- medical consultation
- administration of treatment
- hospitalization
- surgical intervention if necessary

Important medical information (allergies, treatments, medical history):

EMERGENCY CONTACT DURING THE STAY:

Name of the person and relationship to the participant:

Telephone: Email:

8. PARTICIPANT'S COMMITMENT

The participant agrees to:

- Attend classes and respect class schedules
- Follow the instructions given by CAVILAM – Alliance Française and the host family
- Behave respectfully and responsibly
- Not consume alcohol, drugs, or illegal substances
- Comply with French law

In the event of serious misconduct, sanctions may be imposed, including exclusion from the program.
The participant's early return will then be organized at the parents' expense, without reimbursement of the stay.

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9. IMAGE CONSENT

☐ I authorize CAVILAM – Alliance Française to use my child's image for promotional purposes (brochures, website, social media, institutional publications, videos, etc.).

☐ I do not authorize the use of my child's image.

In accordance with the GDPR, this consent may be withdrawn at any time upon written request to info@cavilam.com

Done at: _____

Date: __ __ / __ __ / __ __ __ __

Signature of parent(s) or legal guardian(s) (preceded by the handwritten note "Read and approved")	**Signature of the participant** (preceded by the handwritten note "Read and approved")

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