

**VISITING FRIENDS AND FAMILY IN ISRAEL**  
**PERMISSION AND RELEASE FORM**  
**DUE MAY 5, 2022**



**Student Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(Please print) **Israeli Cell Phone :** \_\_\_\_\_

***Family and Friends in Israel will be able to visit with Kehillah Students on the following dates (please check all that apply):***

€ Saturday, May 21<sup>st</sup> in Jerusalem (Olive Tree Hotel), 9:00 am – 4:00 pm (\*pick-up no earlier than 9:00 am/drop-off no later than 4:00 pm)

€ Saturday, May 28<sup>th</sup> in Tel Aviv (Grand Beach Hotel), 12:00 pm – 5:00 pm (\*pick-up no earlier than 12:00 pm/drop-off no later than 5:00 pm)

Visiting family and friends should plan to meet the students in the lobby of our hotel. Family and friends may take the students out, or meet with them in the hotel. Family and friends under the age of 18 who come to visit a student without being accompanied by an adult will not be able to leave the hotel with the student. The name, age, relationship, address and phone numbers of family or friends whom participants may be visiting during the days and times checked above, must be specified below. All participants will be required to make phone contact with the people they plan to visit once they are in Israel to re-confirm arrangements, including specific times. Travel on public buses is prohibited. \*Students leaving the hotel must return to the hotel and abide by the times set-forth above. Each visitor may only take (at most) two Kehillah students for a visit away from the hotel. These students must have a completed "Visiting Friends and Family in Israel Permission and Release Form" on file by the due date of May 5, 2022. **Each visiting family member or friend must provide valid photo identification prior to departure from the hotel.**

***The student listed above has my permission to visit with any of the following family or friends during his/her time in Israel:***

1. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: \_\_\_\_\_
2. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: \_\_\_\_\_
3. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: \_\_\_\_\_
4. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone No: \_\_\_\_\_

I release Keshet: The Center for Educational Tourism in Israel and Kehillah Jewish High School from any and all liability for any accident or other occurrence that may happen to my child while she/he is not with the program and is visiting family or friends in Israel. I hereby release Keshet: The Center for Educational Tourism in Israel and Kehillah Jewish High School from any and all responsibilities for expenses incurred by me or my child once she/he has left the program, and I understand that all such expenses shall be borne solely by me and my child. I agree to hold Keshet: The Center for Educational Tourism in Israel and Kehillah Jewish High School harmless in the event they are sought to be held liable or responsible for any occurrence in which my child may be involved, once she/he has left the program.

Parent Signature: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Printed Name: \_\_\_\_\_ Applicant Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_