ITALY TRAVEL PROGRAM

Travel Dates: March 5-15, 2027

Approx. Trip Cost: $4,895 - $5,550

For any questions, please contact Mrs. Gentry, Mr. Dickson, or Mrs. Escudero.

Bolles Official Use Only

Do not type/write in this space

Date Received:_____

Signatures: _____

Forms: _____

Paragraph: _____

Payment: _____

M/F _____

GL _____

United States Passport

☐ Yes ☐ No, I will apply for one ASAP ☐ No, but I have a passport from another country and I understand I may need a visa to travel on this trip

Passport Country _____

Passport Number & Expiration Date _____

Student's Name (as it appears, or will appear, on passport)

Last Name _____ First Name _____

Date of Birth (Month/Date/Year) **Current Grade Level**

Date of Birth _____ Grade Level _____

Address

Street Address _____ City/State/Zip _____

Parent Email **Student Email**

Email Address _____ Email Address _____

Family Information

Preferred Contact ☐ Mother ☐ Father

Contact's Full Name _____ Phone Number _____

Travel Experience

Please List Any Previous Travel Experience(s) _____

Personality Please check the boxes below that best match your personality

☐ Outgoing	☐ Friendly	☐ Conservative	☐ Talkative
☐ Shy	☐ Flexible	☐ Humorous	☐ Responsible
☐ Studious	☐ Self-Confident	☐ Spontaneous	☐ Feels for Others
☐ Organized	☐ Curious	☐ Sensitive	☐ Makes Friends Easily

Please Feel Free to add 2 More Personality Traits

_____

_____

Travel Information [MARCH, 2027]

Do you have any allergies? ☐ Yes ☐ No
(animal, medication, food, smoke,etc.)
If Yes, please specify. _____

Are there any dietary restrictions? ☐ Yes ☐ No
If Yes, please specify. _____

Does your family have a religious affiliation? ☐ Yes ☐ No
If Yes, please specify. _____

In addition to this application you are required to write a 100-word paragraph explaining why you are applying for this program. For example, what are your interests as they relate to this program, what are you curious about, and/or what skills and qualities will you bring to the group?

Custom Travel Program Acknowledgement Form

Dear Bolles Parents and Guardians,
Your child is applying to participate in a unique program that has been specifically designed by The Bolles School and Atlas Workshops with Global Academic Travel for travel to Italy. In order to activate your travel application you must turn in the following online, or in person, to Mrs. Escudero by Wednesday, October 14, 2026: the application, copy of passport, a non-refundable deposit of $500 and the student paragraph. Parents and students, please carefully read the policies below and sign and date the form below acknowledging that you fully understand all of the the policies mentioned on this form and in the travel application.
Sincerest thanks,
Kristina Escudero, Travel Coordinator
escuderok@bolles.org

Application Process
When we process applications, among other things, we consider grade level, world language level (if applicable), interest shown in the subject related to the program, as well as through participation in local and state events. Furthermore, to be eligible for Bolles Travel Programs, applicants must not have any major disciplinary infractions in the calendar year before travel. Violations of school policy to the one-year mark will be handled on a case-by-case basis. Furthermore, all applicants will need to be recommended by their teachers and advisor. The list of finalists selected will then be sent to the Dean's Office a second time for clearance one month prior to traveling abroad. Should you have any questions about the selection process please feel free to contact Mrs. Escudero.
*** Please note that if a student is not accepted into the program, your travel deposit of $500 will be refunded.***

Cost of the Trip
The Italy Program fee is $4,895 - $5,550 and is based on factors such as group size, itinerary, travel dates and flight arrangements.

Payment
I understand that the price for this custom program is based on group size, itinerary, travel dates and flight arrangements. I acknowledge that if I cancel my child's participation, my $500 deposit is non-refundable and that additional cancellation charges may apply based on the date of my cancellation. I understand that the airline will determine the refund policy for the airline ticket, and that there may be additional costs that are non-refundable depending upon the size of the group and the date of the cancellation. I understand that my child will miss one or two days of school and I have checked our projected calendars to make sure that there are no conflicts with Fine Arts productions or Athletics events. I understand that no refunds can be made for cancellations postmarked fewer than 60 days before departure.
Travel deviations are not permitted for this program.
I understand that a 10% late fee will be added to all payments not received in accordance with the dates listed below.
Payment plans may be available, per email request, to ensure timely payments. For payment inquiries email Drew Upchurch at upchurchd@bolles.org.

Payment Schedule	**Wednesday, October 14**	**Friday, November 6**	**Friday, December 4**
	$500 non-refundable deposit	1/2 of Balance*	Final Balance
		**After acceptance into the program*	

Refund Policy
Because of the special nature of a custom program and the importance of maintaining the group size, cancellation fees may apply. The airline will determine the refund policy for the airline ticket, and any additional fees may not be refundable depending on the group size. In the unfortunate case that a student should need to withdraw from the program at any time, a letter of cancellation must be given to Mrs. Gentry, Mr. Dickson, or Mrs. Escudero.

Participation
I am aware of, and approve of, my son/daughter/ward's decision to apply for participation in the Italy Travel Program. I am aware that his/her participation in this program is contingent upon acceptance into the program according to the established selection process. My child is also aware that his or her participation in this program is contingent upon acceptance into the program according to the established selection process.

Please Sign & Date below acknowledging that you fully understand all of the the policies above.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Application, copy of passport, paragraph and $500 registration deposit are all to be submitted no later than Wednesday, October 14, 2026.