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France

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DISCHARGE OF RESPONSIBILITY FOR MINOR CHILD & ACKNOWLEDGMENT OF RISKS

IN CAPITAL LETTERS

Minor student's name: _____, first name: _____

Date of birth: (day/month/year): _____ / _____ / _____, nationality: _____

Dates of stay: (day/month/year): from _____ / _____ / _____ to _____ / _____ / _____

Francophonie offers students the opportunity to enrol in an international study program. Certain potential risks to personal health and safety are associated with international travel and residence in a foreign country.

We, the undersigned, **Father, Mother or legal guardian** (please circle):

last name, first name _____

of the above minor child, are willing to accept the associated risks and agree that our child participates in Francophonie and the partner school Francophonie programme. We understand that Francophonie cannot guarantee that health and safety of participants in its programme or eliminate all risks from study abroad environments.

Please read attentively, complete and sign this form before the programme begins. Students whose parents fail to complete, sign and return this form will not be allowed to start the programme in Francophonie.

We, parents or legal guardian:

1. acknowledge that we have taken out all necessary insurance to cover our minor child during the period he/she will be staying in France and especially third party insurance, travel insurance, insurance against theft, accidents, health insurance etc. With this we give you the name, the address, the number of the insurance certificate as well as its 24h help line number.

.....
.....

2. understand that our child is under the responsibility of Francophonie only during class hours.

3. understand that Francophonie cannot hold responsible of our child's behaviour outside of the school and that Francophonie cannot monitor our child outside of its premises, even if our child is absent from class. Francophonie will inform the parents or legal guardian immediately of any unjustified absence. We understand that Francophonie cannot guarantee the health and safety of our child outside of the school (security, theft etc).

4. are financially responsible for any damage that our child will cause during its stay in France.

5. understand that by registering our child at Francophonie, he/she participates in a linguistic programme by a language school. Please note that our school is not supposed to be a ' holiday camp for minors '.

6. took cognizance that during his linguistic stay he will have the possibility to enrol and participate in cultural activities which are proposed by the school. These activities are supervised by the personnel of the school. Museum visits, trips to neighbour cities by bus, train or even by boat (professional companies).

7. Nice, situated by the sea, offers a lot of watersports attractions. Therefore Francophonie has to be informed if your child is allowed to participate in those kinds of activities which are supervised by professionals. ***Please tick off where applicable.***

Our child can swim alone more than 25 metres	YES () NO ()
We authorize our child to a tour on a buoy pulled by a motor boat	YES () NO ()
We authorize our child to participate in water paragliding	YES () NO ()
We authorize our child to participate in a diving session	YES () NO ()
We authorize our child to participate in a sailing session	YES () NO ()
We don't authorize any of those activities ()	

8. authorize Francophonie staff or the host family in Nice to take all necessary measures in case of health problems (hospitalization and / or surgical operation).

We inform the school that our child takes a medical treatment (medicaments):

.....,

that our child suffers from allergies and/or intolerance of medicaments and/or other physical problems :

.....

9. We accept that my son / my daughter can go out unattended until 8 pm.

Please tick off where applicable...

- I authorise my son / my daughter to go out on school days until pm **(not later than 11 pm)**,
- at weekends until..... pm **(not later than 11 pm)**.
- I **do not** authorise my son / daughter to go out on school days.
- I **do not** authorise my son / daughter to go out at weekends.
- I authorise my son / daughter to go out **without time restriction** on school days. *
- I authorise my son / daughter to go out **without time restriction** at weekends. *

* Please note that if you allow your child to go out without time restriction, neither the host family, neither the school verifies at what time your child comes back home at night.

11. understand that our child's host family in Nice cannot be hold responsible of our child behaviour outside of the apartment and that the host family cannot watch over our child outside of the apartment. The host family will inform Francophonie of any misconduct or failure to follow the curfew. We understand that the host family cannot guarantee the health and safety of our child outside of the apartment and if our child fails to follow the curfew.

12. agree that Francophonie undertakes all the necessary if our child fails to follow the curfew, the safety regulations or the rules of conduct during his/her stay in France, knowing that we will be responsible financially and legally of our child's behaviour (repatriation fees as well as all expenses involved for our child's trip back home will be paid by us).

13. release Francophonie and the host family in France from any and all claims arising out of our child misconduct or if our child does not attend classes regularly.

14. acknowledge that we have read the terms and conditions and accept them.

Parents' or legal guardians' signatures,

Father

Mother

Legal Guardian

Imperatively to complete:

- Address, **phone number** and email address where we can contact you **24 hours a day** during your child's trip abroad

phone : _____ or _____

Your childs mobile phone number: _____

email : _____ @ _____

Note: Students whose parents fail to complete, sign and return this form will not be allowed to start the programme in Francophonie.

Safety instructions to read carefully with your child before the arrival in Nice

A parent or tutor, you can contact us at any time concerning health or security questions of your child. During school opening hours (Monday to Friday from 8.30 to 17.30) please call the school office at +33 4 9316 02 44.

Outside these days and hours, you can reach the school's emergency phone at +33 7 69 45 29 14.

I'm ill, I don't feel well, another person is feeling sick, etc...

I'm at the Francophonie

I inform my teacher or the Francophonie administration

I'm in my host family

I speak first to my host family. If they are not in, I call the school's emergency no. : +33 7 69 45 29 14 or :

Fire brigade, phone : 18 / Police, phone : 17 / Emergency Doctor, phone : 15 / SOS from your mobile : 112

SOS médecin, phone: +33 4 93 85 01 01, emergency room of the Hôpital Pasteur, 30 voie Romaine Dévoluy Tél. : +33 4 92 03 77 77

I'm on my own

I call the school's emergency no. : +33 (0) 6 10 14 47 69

or :

Fire brigade, phone : 18 / Police, phone : 17 / Emergency Doctor, phone : 15 / SOS from your mobile : 112

SOS médecin, phone: +33 4 93 85 01 01, emergency room of the Hôpital Pasteur, 30 voie Romaine Dévoluy Tél. : +33 4 92 03 77 77

I just need to see a doctor, a dentist, etc ..

I talk to the directors, the school administration or to my host family

There is a fire, a serious emergency...

I'm at the Francophonie school

I listen to my teacher and follow his instructions. If I'm not in class, I quickly leave the building without panic..

I'm in my host family

I inform my host family and leave the building or house quickly but calmly.

Fire brigade, phone : 18 / Police phone. : 17 / SOS from your mobile : 112

I'm on my own

I contact

Fire brigade, phone : 18 / Police phone. : 17 / SOS from your mobile : 112

I'm being attacked or I'm feeling unsafe

I contact

Fire brigade, phone : 18 / Police phone. : 17 / SOS from your mobile : 112

I also inform my parents in all these cases!