

TZFAS SHLUCHIM 5786

# ISRAEL TRIP AGREEMENT

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**Trip Dates: May 29, 2026 – June 2, 2026**

B”H

*By signing below, I fully acknowledge and agree to the following:*

## I. Authority & Discipline

**Authority:** The **Shluchim and Hanhala** retain complete authority over my child for the entire duration of the trip. All decisions regarding discipline, safety, or early return are final and are not subject to dispute or claim.

**Disciplinary Return:** In the event that my son must be sent back to Tzfas due to disciplinary issues, I hereby authorize the **Shluchim (via Yeshivas Tzeirei Hashluchim)** to charge my credit card on file for the full cost of the return travel, at their sole discretion.

## II. Financial Authorizations

**Travel Fee:** I consent to the Shluchim retaining the full amount previously charged for the trip, unless alternative arrangements were mutually agreed upon and confirmed with the Shluchim prior to May 18, 2026.

**Damage & Disruption:** In the event of property damage or disruption caused by or linked to my son, I authorize the **Shluchim (via Yeshivas Tzeirei Hashluchim)** to charge my credit card for all associated costs. I agree that the Shluchim may process these charges at their discretion without further contest. *The Shluchim will notify me promptly in the event that such a charge becomes necessary.*

## III. Medical, Legal & Travel Logistics

**Medical & Legal Liability:** I understand that in the event of any medical emergency, hospitalization, or legal issue Chas V’shalom, the Yeshiva and its staff bear **no responsibility** to remain with or supervise my son individually. The Shluchim’s responsibility is to the group as a whole. In such an event, all personal, financial, and legal responsibilities fall **entirely** upon the parents, including the necessity of a parent or guardian traveling to Israel to assist their son.

**Alternative Travel Arrangements:** If I choose to have my son leave the trip early or not return to the Yeshiva with the group, the Yeshiva bears no responsibility for his travel, logistics, or safety. My son will officially leave the care and responsibility of the Shluchim the moment he departs from the program. **I agree to notify the Shluchim in advance if I intend to have my son leave early or not return with the group, so that logistics can be planned accordingly.**

**Insurance:** I confirm that my son holds valid traveler’s insurance or Israeli insurance covering the entire duration of the trip, and that this information has been fully provided to the Shluchim.

**Documentation:** I confirm that all other required forms have been fully completed and submitted.

Parent’s Name: \_\_\_\_\_ // Bochor’s Name: \_\_\_\_\_

Signature: \_\_\_\_\_ // Date: \_\_\_\_\_