PLEASE POST

SCHOOL DISTRICT OF SHOREWOOD
Shorewood, Wisconsin
June 23, 2026 AGENDA

SCHOOL BOARD MEETING
6:00 PM
Shorewood High School Library Media Center (LMC)
1701 East Capitol Drive
Shorewood, WI 53211

Parking is available in the Shorewood High School lot; please enter through the Administration Building doors and take the stairs up to the second floor. *An elevator is accessible near the east stairs.*

Participants may also access the Annual Meeting on Zoom:

Join Zoom:
https://us02web.zoom.us/j/81599627722
Meeting ID: 815 9962 7722
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Dial by your location
+1 646 876 9923 US (New York)
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Meeting ID: 815 9962 7722
Find your local number: https://us02web.zoom.us/u/kdeePLnyIh

Parameters for Public Comment
The Board welcomes public comments. Public comments are limited to three minutes per person. Per Wisconsin's open meeting law and guidance issued by Wisconsin's Attorney General, we cannot engage in substantive discussions or act on items not on the agenda; however, we will follow up with speakers after the

meeting or add items to a future Board agenda for purposes of addressing the matter. Further, we do not permit discussion of pupils, current or former staff, or job candidates. The Board is also reachable by email at schoolboard@shorewood.k12.wi.us.

This meeting notice was posted on June 18, 2026.

I. **6 pm CALL TO ORDER**
- A. Adopt the Agenda (GC2)
- B. Overarching Result for Shorewood School District (R1)
  Our students are leaders who challenge themselves to grow and achieve academically, pursue their passions, navigate change, learn continuously and contribute to the common good.
- C. Awards and Recognitions

II. **6:05 pm PUBLIC COMMENT #1 (GC3)**
Initiate and maintain effective communication with the citizens and other important stakeholder groups as a means to engage them in the work of the Board and the District.

III. **6:20 pm SUPERINTENDENT'S REPORT** **3**

IV. **6:30 pm SUPERINTENDENT'S CONSENT AGENDA**
- A. Approval of District Staffing Changes: Appointments, Resignations, Retirements, and Leave of Absence Requests 6
- B. Approval of Monthly Financials (May 2026) 8

V. **6:35 pm BOARD BUSINESS AND POSSIBLE BOARD ACTION**
- A. Approval of 2026-2027 SEA Compensation Agreement 16
- B. Acceptance of SEED Foundation 2026 Grant Commitments and Annual Campaign Contribution 18
- C. Presentation of 2026 School Perceptions Survey Reports, Dr. Derek Gottlieb, Senior Research Director, School Perceptions

VI. **7:30 pm BOARD CONSENT AGENDA (GC2)**
- A. Approval of Board Meeting Minutes 19
  June 9, 2026 Regular Board Meeting
- B. Approval of SIS Student Trip to Costa Rica (Summer 2027) 21
- C. Approval of SHS Band/SHS Choir Trips to Italy (March 2027) 50

VII. **7:35 pm PUBLIC COMMENT #2 (GC3)**
Initiate and maintain effective communication with the citizens and other important stakeholder groups as a means to engage them in the work of the Board and the District.

VIII. **7:45 pm BOARD MEMBER REPORTS**

IX. **7:55 pm REVIEW OF 'TO DO' AND FUTURE AGENDA ITEMS**

X. **8:00 pm RECESS AND DEBRIEF**

EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Superintendent's Report
Date: June 23, 2026
Prepared by: Laurie Burgos, Superintendent

Recommended action:
__X__ Information only
Presentation/discussion
Discussion/action by School Board
Presentation/action next meeting

Purpose:
To summarize school and District topics, discuss strategic priorities, and provide follow up on items from prior Board meetings.

Budget and Policy Updates
First, I am pleased to confirm that the Shorewood Education Association (SEA) has accepted the School Board's compensation offer for the 2026-2027 school year. The terms include a cost-of-living increase to the Teacher Salary Schedule, inclusive of steps and lanes, a one-time retention award of $1,000 to returning teachers, up to five additional paid days for Education Support Professionals (ESPs/aides) contingent upon attendance, and up to five days of additional paid training for ESPs during school breaks.

The financial commitments outlined in this Agreement have been reflected in our Preliminary 2026-2027 Operating Budget approved on June 9, and I want to review the remaining steps in the annual budget development process:

- We expect state aid estimates in early July, and will be updating revenue, expense and tax levy information in preparation for the August 25 Annual Meeting;
- Certified aid data is released in October, and the School Board will have the opportunity to review the draft Original Budget at their October 13 meeting; and

- Board action on the Original Budget will be needed at the October 27 meeting, per statute.

I also want to provide some updates on federal and state education policy and funding:

- On June 16, the Trump administration announced that two of the Department of Education's biggest programs - the Offices of Civil Rights and Special Education & Rehabilitative Services - will move to the Departments of Justice and Health and Human Services, respectively. Though the federal government administers just 10% of public education funding nationwide, education and civil rights organizations have expressed concerns about moving oversight of the administration of Individuals with Disabilities Act (IDEA) funds and the protections it provides to students with disabilities to agencies without education expertise. The Department moved several other programs, including Elementary and Secondary Education and Safety, to the Departments of Justice, Health and Human Services, Interior, and Labor in early 2026;
- Earlier this month, the Wisconsin Department of Justice joined a multistate lawsuit that challenges the U.S. Department of Education's discontinuation of a Personnel Development Grant (SPDG) program. Before closing on September 30, 2025, Wisconsin's SPDG grants addressed statewide efforts to attract and retain special education staff and supported services for children with disabilities; and
- Wisconsin Act 89, which requires all public, private, and charter schools to adopt policy on appropriate communication between employees, volunteers, and students (both during and outside of school hours) will be effective September 1, 2026. The District is in the process of making required changes to policies, and all staff will receive training provided by the Wisconsin Department of Public Instruction (DPI) prior to the beginning of the school year.

District and School Updates

A panel of current students and parents, staff, and members of the community will conduct interviews for the contract position of 2026-2027 Artistic & Drama Director. Those who submitted proposals are familiar with Shorewood Drama or have extensive secondary school drama experience. We hope to make an appointment within a few weeks, ensuring that both the SHS drama season and other productions are well-supported and successful while we continue to evaluate the needs of students and drama course offerings for 2027-2028.

The District has also been recruiting for a small number of certified staff vacancies, and we have received accepted offers for the positions of Dean of Students at Shorewood Intermediate School, as well as classroom vacancies that resulted from retirements and leave of absence requests.

Following discussion at recent Board meetings, I want to confirm that the Village of Shorewood issued a Request for Proposals for the design, printing, and publication of Shorewood Today on June 16. Shorewood Today is an important communication vehicle for the District, and we look

forward to staying actively involved in the identification of a new design team, and the future of the magazine. Responses to the Request for Proposals are due on July 17, and the Village hopes to present a Service Agreement to the Village Board of Trustees on September 7.

Finally, SEED and the Alumni Association have worked together to host our Annual Community Picnic & All-Alumni Reunion on June 20, and their efforts to help Shorewood graduates and their families stay connected to the District and our educational mission are important. The Classes of 1971 and 1986 scheduled their reunion activities to include the June 20 event; the Classes of 1966, 1976, 1996, and 2006 have scheduled reunions in Shorewood in the months ahead.

EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Leave of Absence Request
Date: June 23, 2026
Prepared by: Carrie Wettstein

Recommended action:
___ Information only
___ Presentation/discussion
___ Discussion/action by committee
_X_ Discussion/action by Board of Education
___ Presentation/action next meeting

Recommendation(s): Approval
Purpose: Leave of Absence Request
Background:

Cheri Sullivan, Shorewood High School Math Teacher, has requested a leave of absence for the 2026-2027 school year.

EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Staff Appointments
Date: June 23, 2026
Prepared by: Carrie Wettstein

Recommended action:
___ Information only
___ Presentation/discussion
___ Discussion/action by committee
_X_ Discussion/action by Board of Education
___ Presentation/action next meeting

Recommendation(s): Approval
Purpose: Appointments

Background:
Kacey Campbell has accepted the position of Dean of Students at Shorewood Intermediate School; Michelle Herrmann has accepted the position of Math Teacher and Interventionist at SIS.

Kayla Witte has accepted the position of K5 Teacher (one-year contract) at Lake Bluff Elementary School.

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EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Monthly Financial Reports
Date: June 23, 2026
Prepared by: Heather Heaviland

Recommended action:
___ Information only
___ Presentation/discussion
_X_ Discussion/action by board of education
___ Presentation/action next meeting

Purpose: Financial reports are provided to the Board monthly to assist with monitoring of financial condition and compliance with the adopted budget.

May 2026 Statements
May 2026 financial statements reflect activities and financial changes for the first eleven months of the 2025-2026 fiscal year (FY26):

- Revenue and Expenses
    - Revenues and expenses in the District's general operating funds (10/27) are largely in line with historical trends and expectations. The financial dashboard attached provides additional narrative on revenue and expense trends.
    - Revenue from interest income and student fees is projected to exceed expectations, which for budgeting purposes are typically set conservatively given the uncertainty in this revenue stream. Student fee revenue increases are offset by increases in expenses.
    - Expenses are so far lower than expected for vehicle purchases and equipment. We do anticipate executing the vehicle and equipment purchases approved in this year's budget later in the year. We will also allocate our vehicle depreciation to a designated fund balance account at the end of the year.
    - Expenses are also trending low for the District's contribution to employee's health insurance deductibles. These will also be allocated to a designated fund balance account for health care expenses at the end of the year.

    - To the extent that there is a surplus available at the end of the year, the majority of these funds will be transferred to Fund 46 in alignment with the District's financial strategy.
    - The District budgeted in anticipation of a narrow margin of revenue over expenses in food service and is currently tracking to be very close to break even.
- Balance Sheet
    - Changes to the balance sheet are in line with expectations.

Attachments:

- ☐ Financial Dashboard 2026-05
- ☐ Cash Receipts 2026-05
- ☐ Budget Status 2026-05
- ☐ Check Register 2026-05
- ☐ Balance Sheet 2026-05

Additional Information

Understanding Account Numbers: Account numbers are shown on several of the monthly reports. A complete description of account codes and how they are used can be obtained from the Business Office or Department of Public Instruction / School Financial Services website. The following is provided to assist with reading the provided monthly reports.

Fund - the 1st two digits are a designation of an accounting entity. The accounting entity is assigned by the DPI to ensure compliance with various statutory requirements related to the type of financial transactions reported. The common funds are:

10	General Fund is for recording any transaction not required to be recorded in another fund. This fund accounts for about 75% of total financial transactions.
21	Special Revenue Trust Fund is used to record transactions financed with non-governmental donations or other receipts designated for a specific educational purpose. Examples include support from PTO's, booster clubs, SEED and so forth.
27	The Special Education Fund is considered a sub-fund to the General Fund and is used to segregate financial transactions related to extraordinary costs for meeting the needs of students identified as requiring an Individualized Education Plan.
38 & 39	These funds are used to record property taxes levied for the purpose of repayment of long-term debt and the corresponding transactions for the principal and interest payments.

41 & 46 Capital Projects funds are used to fund building improvements. Revenue for Fund 41 comes from the property tax levy and for Fund 46, from an inter-fund transfer.

50 The fund is used to segregate financial transactions related to operating the school food service program. A deficit, if any, in this fund is covered with a transfer from the General Fund.

80 Financial transactions related to operating the Fitness Center , Recreation Programs or other community oriented activities are recorded in the Community Services Fund.

Type - accounts codes have the following account types:

A	Asset
L	Liability
Q	Equity
E	Expense
R	Revenue

Shorewood School District

Monthly Financial Report

Fiscal Year 2026 Revenue and Expenditure Activity Through May

FISCAL YEAR 2026 REVENUE AND EXPENDITURE SUMMARY THROUGH MAY

1. CURRENT YEAR-TO-DATE ACTUALS COMPARED TO THE PREVIOUS YEAR

COMPARED TO THE SAME PERIOD, TOTAL REVENUES ARE

$622,244

HIGHER THAN THE PREVIOUS YEAR

COMPARED TO THE SAME PERIOD, TOTAL EXPENDITURES ARE

$114,421

LOWER THAN THE PREVIOUS YEAR

COMPARED TO THE SAME PERIOD, THE FUND BALANCE IS

$4,494,018

HIGHER THAN THE PREVIOUS YEAR

2. CURRENT YEAR-TO-DATE ACTUALS COMPARED TO THE BUDGET

CURRENT YEAR-TO-DATE REVENUE COLLECTIONS ARE TRENDING

$767,604

HIGHER THAN THE BUDGET

CURRENT YEAR-TO-DATE EXPENDITURES ARE TRENDING

$1,117,547

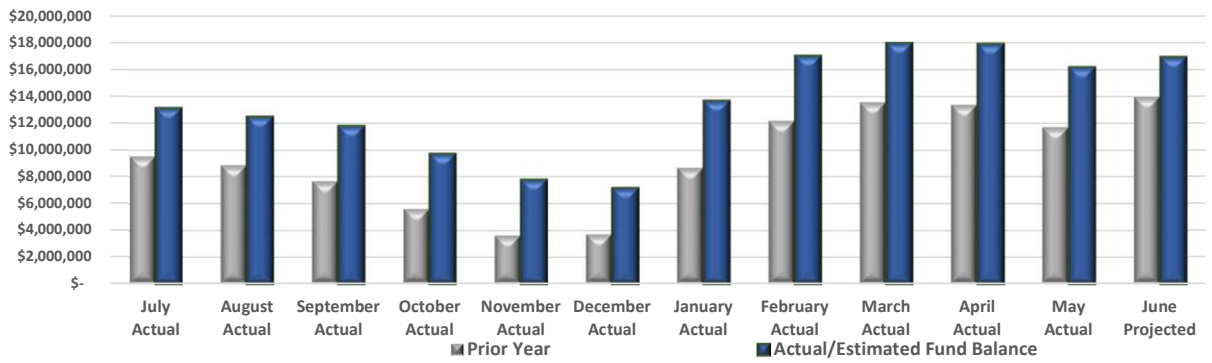
LOWER THAN THE BUDGET

POTENTIAL NET IMPACT WOULD RESULT IN A

$1,885,151

HIGHER FUND BALANCE THAN ORIGINAL ESTIMATES

3. FUND BALANCE COMPARISON



JUNE 30 2025 ENDING FUND BALANCE

$13,978,530

ESTIMATED 2026 YEAR END FUND BALANCE

$16,922,084

FISCAL YEAR 2026 MONTHLY REVENUE SUMMARY - MAY

1. MAY MONTH END REVENUE OVERVIEW (MTD)

	Current Year MTD Amount	Prior Year MTD Amount	Actual Compared to Last Year
Revenue From Local Sources	175,075	154,340	20,735
Revenue From State Sources	113,515	100,798	12,717
All Other Revenue	44,630	196,525	(151,895)
Total Revenue	333,221	451,664	(118,443)

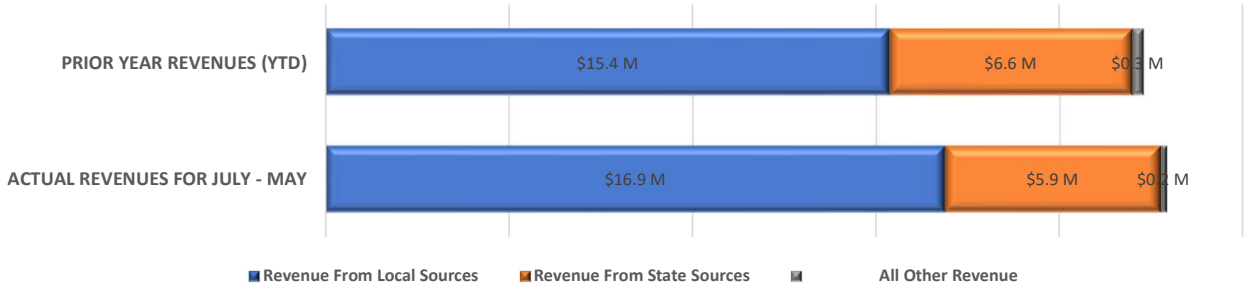
ACTUAL REVENUE FOR THE MONTH WAS DOWN

$118,443

COMPARED TO LAST YEAR.

Overall total revenue for May is down -26.2% (-$118,443). The largest change in this May's revenue collected compared to May of FY2025 is lower federal aid received through state agencies o (-$90,776) and lower federal special projects aid transited throug (-$42,181).

2. YEAR TO DATE REVENUE OVERVIEW (YTD)



	Current Year YTD For July - May	Prior Year YTD For July - May	Actual Compared to Last Year
Revenue From Local Sources	16,872,425	15,360,093	1,512,331
Revenue From State Sources	5,878,322	6,622,778	(744,456)
All Other Revenue	161,908	307,539	(145,631)
Total Revenue	22,912,654	22,290,410	622,244

COMPARED TO THE SAME PERIOD, TOTAL REVENUES ARE

$622,244

HIGHER THAN THE PREVIOUS YEAR

Fiscal year-to-date General Fund revenue collected totaled $22,912,654 through May, which is $622,244 or 2.8% higher than the amount collected last year. The largest difference in revenue when comparing current year-to-date revenue collected through May to the same period last year is taxes revenue coming in $1,457,274 higher compared to the previous year, followed by state aid - general coming in -$800,839 lower.

FISCAL YEAR 2026 MONTHLY EXPENDITURE SUMMARY - MAY

3. MAY MONTH END EXPENDITURE OVERVIEW (MTD)

	Current Year MTD Amount	Prior Year MTD Amount	Actual Compared to Last Year
Salaries and Benefits	1,717,073	1,710,366	**6,708**
Services, Supplies & Materials	269,889	395,371	**(125,482)**
All Other Expenses	83,343	34,175	**49,168**
Total Expenditures	2,070,306	2,139,911	**(69,606)**

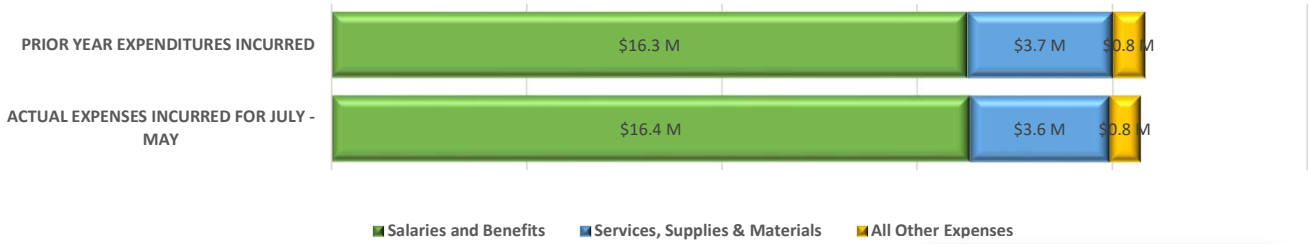
ACTUAL EXPENSES FOR THE MONTH WAS DOWN

$69,606

COMPARED TO LAST YEAR.

Overall total expenses for May are down -3.3% (-$69,606). The largest change in this May's expenses compared to May of FY2025 is higher equipment/vehicle-replacement ($62,581),lower payment to non-governmental agencies and indi (-$42,903) and lower supplies (-$26,013).

4. YEAR TO DATE EXPENSE OVERVIEW (YTD)



	Actual Expenses For July - May	Prior Year Expenditures Incurred	Actual Compared to Last Year
Salaries and Benefits	16,353,788	16,290,230	**63,558**
Services, Supplies & Materials	3,574,804	3,717,932	**(143,128)**
All Other Expenses	791,092	825,942	**(34,850)**
Total Expenditures	20,719,684	20,834,105	**(114,421)**

COMPARED TO THE SAME PERIOD, TOTAL EXPENDITURES ARE

$114,421

LOWER THAN THE PREVIOUS YEAR

Fiscal year-to-date General Fund expenses totaled $20,719,684 through May, which is -$114,421 or -.5% lower than the amount expended last year. The largest difference in expenditures when comparing current year-to-date expenditures through May to the same period last year is that equipment/vehicle - initial purchase costs are -$222,310 lower compared to the previous year, followed by permanent full time coming in $145,780 higher and payment to non-governmental agencies and indi coming in -$101,747 lower.

PROJECTED FISCAL YEAR 2026 REVENUE AND EXPENDITURE SUMMARY

5. PROJECTED YEAR END REVENUE RESULTS COMPARED TO THE BUDGET

CURRENT YEAR-TO-DATE REVENUE COLLECTIONS ARE TRENDING

$767,604

HIGHER THAN THE BUDGET

	Budgeted Annual Revenues	Actual/Estimated Calculated Annual Amount	Variance Favorable/ (Unfavorable)
Revenue From Local Sources	20,448,108	20,987,670	539,562
Revenue From State Sources	8,248,362	8,415,012	166,650
All Other Revenue	2,456,237	2,517,630	61,392
Total Revenue	31,152,706	31,920,311	767,604

The top two categories (earnings on investments and other revenue from local sources), represents 63.7% of the variance between current revenue estimates and the budget.

Top Budget vs. Actual/Estimated Amounts

Variance Based on Actual/Estimated Annual Amount	Expected Over/(Under) Budget
EARNINGS ON INVESTMENTS	266,588
OTHER REVENUE FROM LOCAL SOURCES	222,632
STATE AID - CATEGORICAL	91,973
SCHOOL ACTIVITY INCOME	68,448
All Other Revenue Categories	117,964
Total Revenue	767,604

6. PROJECTED YEAR END EXPENDITURE RESULTS COMPARED TO THE BUDGET

CURRENT YEAR-TO-DATE EXPENDITURES ARE TRENDING

$1,117,547

LOWER THAN THE BUDGET

	Budgeted Annual Expenses	Actual/Estimated Calculated Annual Amount	Budget compared to Actual/Estimated
Salaries and Benefits	20,813,854	20,286,672	**(527,183)**
Services, Supplies & Materials	4,914,422	4,676,602	**(237,820)**
All Other Expenses	4,366,027	4,013,483	**(352,543)**
Total Expenditures	30,094,303	28,976,757	**(1,117,546)**

The top two categories (health insurance and personal services), represents 32.5% of the variance between current expense estimates and the budget.

Top Budget vs. Actual/Estimated Amounts

Variance Based on Actual/Estimated Annual Amount	Expected Over/(Under) Budget
HEALTH INSURANCE	**(218,787)**
PERSONAL SERVICES	**(144,219)**
PAYMENT TO NON-GOVERNMENTAL AGENCIES AND INDI	**(141,190)**
EQUIPMENT/VEHICLE - INITIAL PURCHASE	**(139,200)**
All Other Expense Categories	**(474,150)**
Total Expenses	**(1,117,547)**

EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Teacher and Aide Salary/Wage Increases
Date: June 23, 2026
Prepared by: Heather Heaviland

___ Information only
___ Presentation/discussion
_X_ Discussion/action by board of education
___ Presentation/action next meeting

Purpose:
To approve the total base wage agreement with the SEA, and to approve supplementary pay for the 2026-2027 school year for both teachers and aides.

Background:
Representatives of the Board, District, and SEA, which represents both the teachers and aides, met on June 8th, 2026 and agreed on a 2.63% increase to the total base wage value of each salary schedule. The increase will be allocated across step, lane (if applicable), and cell value increases.

During a meet and confer session outside of the formal negotiations process, the District and SEA also discussed challenges of the current teacher salary schedule. By design teachers receive the largest increases when they meet educational milestones and during the early stages of their career. As a result, over half will receive less than a 0.5% increase next year. In light of this challenge, the District proposed a one-time lump sum payment of $1,000 for staff actively employed under a teacher contract on both 6/11/26 and 9/30/26 (pro-rated for part-time teachers). The one-time payment will be made on the 9/30 payroll. The District asked the SEA to participate in future meet and confer discussions regarding possible changes to the salary schedule.

The aide salary schedule seems to be functioning well following the District's implementation of a new schedule with more frequent but smaller step movement in 2025-2026. However, during meet and confer sessions outside of the negotiation process, the aides requested opportunities to earn more throughout the year on days when they are not scheduled to work. The District identified two strategies to address these concerns while also addressing other challenges. First, the District will provide opportunities for up to five days of paid training during breaks. This provides an opportunity to receive compensation on days off, while also addressing a need for additional training. Second, the District will offer bonus pay equivalent to up to five days of pay for aides who have excellent attendance (present for approximately 97% of work days, which equates to missing no more than five days for aides working five days a week).

Fiscal impact:
The 2.63% increase was included in the approved preliminary budget. Additional costs, which will be reflected in the original budget, include:

- $172,551.50 for teacher bonuses, inclusive of fringe benefits.
- Up to a maximum of $48,531.76, inclusive of fringe benefits, for additional paid days for aides. This assumes that 100% of aides leverage 100% of additional paid days.

The addition of these costs to the operating budget will reduce the budgeted margin to 1.9%, which is below the 2% goal outlined in the District's strategic vision. The District expects, however, to close this gap with recently received grant funds and savings from a lower than expected increase in property and liability insurance premiums. The District will present an original budget that maintains a minimum of a 2% operating margin.

Attachment(s):
FY27 SSSA Salary Schedule Agreement Draft
FY27 SEA Agreement Draft

EXECUTIVE SUMMARY
FOR THE SHOREWOOD SCHOOL BOARD

Topic: Acceptance of SEED Foundation Grant Funds
Date: June 23, 2026
Prepared by: Carrie Wettstein

Recommended action:
___ Information only
___ Presentation/discussion
___ Discussion/action by committee
_X_ Discussion/action by Board of Education
___ Presentation/action next meeting

Purpose: Acceptance

Background:
This year, the SEED will provide approximately $184,000 to fund the following grants to teachers, as well as District priorities:

2026 Approved Teacher Grants: $32,756
1. SHS Science: Protein modeling kits (Yoselin Martinez) – $4,400
2. Band Department: Artist in Residence & commissioned original composition (Kyle Amati) – $5,000
3. Project Lead the Way: 10 digital printers for SIS (Dustin Slusser) – $8,790
4. New Horizons: "Newt" Boat Building Project (Lisa McFarland) – $3,000
5. SHS Econ/Finance: Smart Board (Evan Schmidt) – $6,444
6. SIS Orchestra: Electric piano and instrument repairs (Melissa Honigman) – $4,122
7. AT & LB PE: GaGa Pit (Dom Newman) – $1,000

2026 Approved District Priority Area Funding: $151,500
1. Complex Instruction (Secondary Curriculum): Time and expenses for work with Dr. Kentaro Iwasaki – $20,000
2. Summer Curriculum: Stipends – $10,000
3. K-8 Diagnostic and Intervention Tools: Software licenses (Eureka Equip, Lexia IXL, Zuern Math) – $31,500
4. Curriculum and Training Investments: Science and math materials/equipment ($61,000) and training/expenses ($29,000) – $90,000

SCHOOL DISTRICT OF SHOREWOOD
Board Meeting Minutes
June 9, 2026

Board Member Participation:	Abby Fowler, President Mary Theisen, Vice President Brian Feiges, Treasurer Ellen Eckman, Clerk Aaron Lippman, Governance Officer
District Administrator Participation:	Laurie Burgos, Superintendent Heather Heaviland, Director of Business Services

I. 6:00 pm CALL TO ORDER
A. Motion to Adopt the Agenda
MOVED by Ellen Eckman and SECONDED by Mary Theisen AYE: 5 NAY: 0
B. Overarching Result for Shorewood School District
C. Awards & Recognition - Student Board Representatives

II. 6:05 pm PUBLIC COMMENT #1 - no comments

III. 6:06 pm SUPERINTENDENT'S REPORT
Long-Term Financial Sustainability: SHS Student Support Services Discussion

IV. 6:38 pm SUPERINTENDENT'S CONSENT AGENDA
A. Approval of District Staffing Changes: Appointments, Resignations, Retirements
MOVED by Ellen Eckman and SECONDED by Aaron Lippman AYE: 5 NAY: 0

V. 6:39 pm STUDENT BOARD REPRESENTATIVE REPORT - Wellness Week

VI. 6:45 pm BOARD BUSINESS AND POSSIBLE BOARD ACTION
A. Approval of Seven (7) Additional Open Enrollment Seat for the 2026-2027 School Year:

3rd Grade: 1
4th Grade: 1
5th Grade: 1
9th Grade: 1
11th Grade: 2
12th Grade: 1

MOVED by Aaron Lippman and SECONDED by Ellen Eckman AYE: 5 NAY: 0
B. Approval of the Preliminary 2026-2027 Operating Budget

MOVEd by Ellen Eckman and SECONDED by Mary Theisen AYE: 4 NAY: 1

VII. 7:36 pm BOARD CONSENT AGENDA
A. Approval of Board Meeting Minutes
May 11, 2026 Board Workshop/Open Meeting & Open Records Training
May 26, 2026 Regular Board Meeting
June 2, 2026 Closed Session
MOVED by Ellen Eckman and SECONDED by Mary Theisen AYE: 5 NAY: 0

VIII. 7:37 pm PUBLIC COMMENT #2 - no comments

IX. 7:38 pm BOARD MEMBER REPORTS
WPEN Partner Meeting, Bi-Board Meeting Rescheduled, *Shorewood Today* RFP Update

X. 7:42 pm REVIEW OF TO DO AND FUTURE AGENDA ITEMS
June 10 Bi-Board Meeting; Coherent Governance Board Workshop; School Perceptions Survey Reports; SEED Foundation Contributions

XI. 7:44 pm RECESS AND DEBRIEF

Costa Rica Trip 2027: Approval Document Packet
Prepared June 2, 2026 for June 9, 2026 Board Meeting

Contents:

SCHOOL DISTRICT OF SHOREWOOD

352.1 Exhibit (1)

OVERNIGHT TRIP REQUEST FORM

Before submitting this form to your building principal, please review 352.1 policy, guidelines and exhibits. Submit this form and supporting documentation to your School Principal for approval.

Name of District Employee in charge: **Sara Kitzinger Anton**

Destination: **Costa Rica (San José, Alajuela and surrounding areas)**

Date and time of departure: **During 9 days between August 2, 2027 through August 19, 2027 (Travel agency to confirm final dates by May 30, 2027.)**

Date and time of return: **During 9 days between August 2, 2027 through August 19, 2027 (Travel agency to confirm final dates by May 30, 2027.)**

Name of class/co-curricular activity/student group: **Spanish students, going into grades 8-9.**

Number of Students attending the trip: **Minimum-20, Maximum-40, plus one chaperone per 5-6 student travelers. Students who wish to attend will be selected through an application process that takes into consideration student attendance, behavior and discipline history, grades, and a personal statement students will include in their application. If not all applicants meet the minimum criteria to travel, not all of the 40 spots will be filled. The application was developed and approved by Sara Kitzinger Anton, organizing teacher volunteer at SIS, and Tiara Rogers, Principal at SIS.**

Are students missing any instructional days/hours of school for this trip? **No**
If yes, please explain:

Description of the educational expectations/correlation to the classroom curriculum associated with this trip: **Students will spend their time immersed in Costa Rican culture and the Spanish language. More specifically, students will take small group (5-7 students) Spanish language lessons with a Costa Rican teacher for 20 hours over the course of the trip. These lessons are differentiated into different groups, based on student language level. In addition, students will practice the language within an authentic context through interactions with tour guides, host families, store owners, groups with which we volunteer, and other community members. Students will connect the culture and language through these interactions, as well as through half- and full-day excursions throughout the trip. These excursions include the following: visiting a volcano (or coffee producer, if the volcano is active at the time of travel) ziplining in the rainforest, seeing**

how chocolate is produced, volunteering in the Alajuela community, learning about the ecosystem on Isla Torguga, touring the historical city of Alajuela, and learning about the ecosystem and wildlife of the central valley. The students are expected to participate in all language activities and cultural excursions with an open mind and desire to connect to the language and its speakers. All students are required to participate in at least 5 of 7 of the flex time pre-departure meetings to build community and preview their experiences abroad. All students and a guardian or adult family representative are required to attend all 3 of the family pre-departure meetings. Though not required, it would be a positive experience for students to participate in fundraising experiences before departure for the trip, in order to deepen personal connections between travelers. Students are expected to ask questions and remain positive and curious about their experiences throughout the trip.

Describe your discipline plan: **All discipline rules and guidelines as provided in "Trip Expectation and Rules" form for student and parent/guardian (Exhibit 2) on page 5 of this packet, all rules/guidelines in the Costa Rica Trip application, and all rules and policies outlined in the Interact Travel documents signed by guardians and students.**

If your trip overlaps with a major religious holiday, how will you accommodate your student(s) desire to observe the holiday? **N/A**

What is your plan for health and safety emergencies? **In the event of an emergency, I will follow all plans as specified in student health information charts and work in conjunction with coordinators on site in Costa Rica to get the student(s) necessary medical care. It is recommended but <u>not required</u> that all student and chaperone participants are fully vaccinated against COVID-19; this is to prevent major illness due to COVID-19 to the greatest extent possible. I will also communicate with families back in Shorewood about the nature and extent of the emergency. Interact, our travel agency, has a close and long-standing relationship with Rancho de Español (where we take language lessons and tours) as well as all host families with the program. This is one of the reasons why Shorewood has used Interact for decades. All of their affiliated tour groups and families prioritize safety. While this trip is more costly than going without an agency, the peace of mind provided by a network of professionals in Costa Rica is, in my opinion, worth the extra cost.**

Number of Chaperones: **1 per 6 students; chaperones will be selected with preference first given for adults who are Shorewood District staff, then those who have chaperoned this trip before, and followed by those with experience in working with this age group and/or with proficiency in the Spanish language. Organizing teacher and/or chaperones will be compensated as per district policy.**

Estimated Cost per Chaperone: **(From Interact Travel Agency on chaperone cost:) Complimentary is 1 for every 6 full-paying students. Starting with full-paying student #7,**

your first Assistant receives 1/6 complimentary for every additional full-paying student. Hypothetically, if 10 enroll, you are complimentary with students #1-6 and your first Assistant is entitled to 4/6 partial complimentary, for full-paying students #7-10. If 13 enroll, you have 2 complimentary and 1/6 partial for your Second Assistant, etc.

Estimated Cost per student before and after fundraising:
Before: $3740 **After: Total cost less student funds raised**

Cost Per Student Details:
-The student fee, based on a group size of 30 or more travelling, is $3565. (Group size is equal to students plus group leaders. Student fee for a smaller group size of 20-29 travelling is $3750.)
-Add approx. $100 on average for luggage fees, both ways.
-Add approx. $75 on average for bus transportation from Shorewood Intermediate School to Chicago O'Hare airport, both ways.
-Cost includes all full meals in Costa Rica. Food not included: Snacks, bottled beverages/water, and meals/snacks in airports or in transit to Costa Rica.

Description of fundraising proposal for the trip:
-Students selling Colectivo Coffee
-Other student- and family-led fundraisers as students and families see fit

Arrangements/provisions made for students in need of financial assistance:
-Fundraising opportunities listed above
-Students with financial need may also apply for a scholarship. A scholarship application will be provided by Principal Rogers to all families and administered per District procedures.

Is this an optional student travel experience? **Yes**

I have complied with all the requirements listed above.

Sara K. Autor **5/15/26**

_____ _____
Signature of District Employee Date

The overnight trip proposal and the accompanying documentation has been reviewed and approved.

5/15/26

_____ _____

Signature of Principal Date

The overnight trip proposal and the accompanying documentation has been reviewed and approved.

_____ _____

Signature of Superintendent Date

The overnight trip proposal and the accompanying documentation has been reviewed and approved by the School Board.

_____ _____

Signature of School Board President Date

352.1 Exhibit (2)

TRIP EXPECTATIONS AND RULES
Costa Rica 2027

EXPECTATIONS

Motor Coach/Air Transportation:

Be prompt for all departures
Be courteous to the coach drivers, tour escorts, and observe coach rules
Keep the coaches clean
Use headphones for all audio equipment

Hotels/Homestays:

Be in your own hotel or homestay room at designated times-no visiting other students' rooms
No one will leave the hotel or homestay room after bed check/lights out.
Be courteous to other guests
Avoid unnecessary noise and running
Be courteous to staff and host families and follow hotel or homestay rules
Any expenses due to vandalism or theft will be assessed to the student(s) responsible
The student will make every effort to adjust to the host family's customs. The student will help out and respect lifestyles and belongings. If a serious problem arises, the student will discuss it with a chaperone immediately.

General Guidelines:

During the trip, student's personal appearance and dress will reflect neatness and cleanliness at all times. You are representing the school district and community of Shorewood.
Students are to show courtesy at all times to district employee, chaperones, peers, tour guides and all others
The student will take care of their personal belongings, passport, and money. Chaperones will not be held liable if these items are lost or stolen.
As this is a school-sponsored trip, all rules that apply in school are also in effect on the trip.
Rule violations will result in disciplinary action according to school policy and consequences will be applied during the trip and/or upon return home.
The student will participate in the organized activities with promptness and cooperation; in other words, the student will arrive ON TIME and with a POSITIVE ATTITUDE.
For international travel, the student will carry a copy of their passport with them at all times.

RULES

1. All students are required to follow all school rules, student code of conduct, and district policies/guidelines throughout the trip.

2. There will be no smoking, purchasing or transporting tobacco products at any time during the trip. Violation of this rule may result in immediate trip home at the parent/guardian's expense. Should this occur, the parent/guardian will be responsible for the supervision of their child.

3. There will be no drinking of alcoholic beverages, purchasing, or transporting alcoholic beverages at any time during the trip. Violation of this rule may result in immediate trip home at the parent/guardian's expense. Should this occur, the parent/guardian will be responsible for the supervision of their child.

4. There will be no use of illegal drugs (including marijuana), purchasing or transporting illegal drugs at any time during the trip. Violation of this rule may result in immediate trip home at the parent/guardian's expense. Should this occur, the parent/guardian will be responsible for the supervision of their child.

5. Possession of a weapon, use of a weapon, or endangering the safety of anyone is strictly prohibited. Violation of this rule may result in immediate trip home at the parent/guardian's expense. Should this occur, the parent/guardian will be responsible for the supervision of their child.

6. Any criminal action involving a student will become the responsibility of the parent/guardian.

7. During this trip, students will not pierce or tattoo any part of their body.

8. Students will notify the chaperones if a health problem arises.

9. During this trip, students will not engage in any sexual activities.

10. Students will not drive any automobile or enter any unauthorized vehicles.

11. Any conduct detrimental to other students will be subject to discipline.

12. Students will stay with their assigned group (minimum of 3 people). A student will not leave the group without chaperone permission. The chaperones will always be told in person by each student where they are going, with whom, and the time at which the student will return.

13. Hotel or homestay room and luggage may be checked at any time.

14. I/we also agree to allow the student's luggage to be searched before leaving for the trip. If forbidden items are found, I/we acknowledge that the student will not be permitted to go on the trip.

15. Any damage caused by an individual(s) including but not limited to vandalism, breakage, stealing, will constitute a violation and may be subject to an immediate trip home at the parent/guardian's expense. Should this occur, the parent/guardian will be responsible for the supervision of their child. Also, any fee or fines assessed as a result of the violation will be assessed to the individual(s) responsible.

16. Replacement or repair of uniforms/equipment/instruments furnished by the School District if lost or damaged through willful neglect will be the financial responsibility of the individual responsible.

17. The student will pay for phone calls and incidental personal expenses.

18. For international travel, the student will use a phone card if the student phones home. The student will ask permission of the chaperone before each time they use the phone/internet.

19. Chaperones will use all due precaution within reason. However, I/we acknowledge the possibility of accidents occurring (i.e., cuts, fractures, illness, etc.) and do not hold the School District, District employee or the chaperones liable.

20. All students must abide by School District's Code of Conduct/ Activities Code and the Shorewood School Board policies/guidelines. Infractions of these policies/codes will result in referral to School Administration.

21. The Shorewood School District does not carry any type of travel insurance for participants, therefore it is encouraged that parents/guardians consider purchasing travel insurance for your child. Please complete "Travel Insurance" form, 352.1 Exhibit (4).

If I commit a serious breach of discipline or crime or disregard any of these stipulations, or the stipulations in the application I submit in order to travel with the group, I may be EXPELLED from the trip at any time, either pre-departure or during the international trip, and may be returned to the United States/ Shorewood at my expense or that of my parents/guardians. I will thus forfeit any refund or restitution for any unused portion of the trip.

I understand that the district employees/chaperones and the Shorewood School District are not liable for my well-being during periods of time that I may be absent from supervised activities or during independent activities. I pledge to abide by the stipulations regarding behavior, and I understand that my participation in the program at any time may be terminated by the district employee in light of my failure to follow these stipulations for any reason which may also be

deemed to be in the best interest of the group. I agree to be sent home without an escort at my own or my parents'/guardians' expense with no subsequent refund.

I have read and understand the trip rules and agreements and agree to adhere to them.

_____	_____	_____
Print Student Name	Signature	Date

I/We have read and understand the trip rules and agreements and understand that I/we and my/our child will adhere to them.

_____	_____	_____
Print Parent/Guardian 1 Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 2 Name	Signature	Date

REVIEWED: _____

Shorewood Intermediate School
SCHOOL DISTRICT OF SHOREWOOD
1701 E. Capitol Drive
Shorewood, WI 53211
414-963-6951

352.1 Exhibit (3)

SIS OVERNIGHT FIELD TRIP
HEALTH INFORMATION AND MEDICAL AUTHORIZATION
Costa Rica Trip 2027: August, 2027

To be completed by parent/guardian for all students attending the overnight field trip

Trip Location : Costa Rica Dates: For 9 days between August 2-19, 2027 (to be determined by 5/30/27.)

Student's Name _____ Date of Birth _____

Student's Complete Address
_____

Name of Parent(s)/Guardian(s)
_____

Primary Parent/Guardian Contact
Name _____ Phone _____

Secondary Parent/Guardian
Contact Name _____ Phone _____

Parent/Guardian Email Address
_____

Secondary Contact Info (if parents cannot be contacted):
Name/Relationship _____
Phone _____

Life Threatening Allergies (check all that apply):

- ❏ Food (list & describe reaction)
  _____
- ❏ Medication (list & describe reaction)
  _____
- ❏ Bee Stings (list & describe reaction)
  _____
- ❏ Other, explain:
  _____
- ❏

Does your student have a history of (check all that apply):
[ ] Asthma **[ ]** Diabetes **[ ]** Seizures **[ ]** Other pertinent health condition
Explain health condition(s) checked above:
_____
_____

Does student have any physical limitations?_____ If yes, please explain:

_____

_____

Does the student have any dietary restrictions? _____ If yes, please explain:

_____

_____

Section 1:

The administration of medication to students on overnight field trips shall be done only when the student has a medical condition that may be adversely affected without medication.

Any prescription or nonprescription medication sent on the field trip must include:

1. The original container. If medication is a prescription, the pharmacy label must accurately reflect medication dose and times as stated in the orders from the doctor.
2. Written **parent** permission for **all prescription and nonprescription** medication.
3. A written order from the **physician** for **prescription** medication (if not already on file at school).

A parent/guardian is responsible for delivering the medication and/or consent forms to the Health Office **5 school days prior to departure** with parent and physician signatures. **Send only the amount of medication needed for the trip.**

Medication: (Check one)

_____**No,** my student **does not** need any medication during the field trip.

_____**Yes,** my student will need medication, but a parent will be chaperoning and will manage student medications. (You do not need to complete medication consent forms; you will not need to turn in any medication to the health office. A parent/guardian may **only** give medication to his/her **own** child.)

_____**Yes,** my student **will need** medication on this field trip. In order to administer medication (prescription and over-the-counter) on the field trip, parents must complete medication consent forms which includes parent signature and
may require a written physician's order.

Please list all prescription, over-the-counter, and homeopathic medication that your child will need for the trip below.

Name of medication _____ Dosage _____
Time(s)_____
Name of medication _____ Dosage _____
Time(s)_____
Name of medication _____ Dosage _____
Time(s)_____
Name of medication _____ Dosage _____
Time(s)_____
Name of medication _____ Dosage _____
Time(s)_____

Section 2: Please initial after the option that applies to your student.

OPTION A (Recommended)

MEDICATION ADMINISTRATION FOR STUDENTS **CAPABLE OF SELF-MANAGING** their own medications:

- List all medications above that this student will be carrying and/or taking on the overnight field trip.
- Any medication this student will be carrying, **MUST** be in its original packaging (with either the prescription or the manufacturer label) with **ONLY** the amount needed, while on the trip (some exceptions may apply, i.e. eye drops, ointments, etc. which are difficult to split up)
- For safety reasons, a district trained staff member needs to have written information (consent forms) about all the medications that your student will be carrying and/or taking on the trip. This is important in case any illness develops and information needs to be given to medical personnel.
- If there is an “as needed” medication, please describe how to determine the need.

I give permission to my student to self-manage his/her own medications while at a school sponsored event, including when away from school property on official school business, according to the written instructions on this form.

_____
Initials

OPTION B

MEDICATION ADMINISTRATION FOR STUDENTS **NOT CAPABLE OF SELF-MANAGING** their own medications:

- Only list and supply medications that this student will definitely need on the overnight field trip.
- Any medication this student needs, **MUST** be brought to school in its original packaging (with either the prescription or the manufacturer label) with ONLY the amount needed while on the trip (some exceptions may apply, i.e. eye drops, ointments, etc. which are difficult to split)
- For safety reasons, all medications must be administered by a district trained adult or parent /guardian administering medication to his/her own student. This student is not allowed to carry over the counter or prescription medications (except for inhalers, and/or epi-pens).
- Any medications listed on this form MUST be brought to school prior to departure.
- If there is an “as needed” medication, please describe how to determine the need (in the purpose box of the chart below)

I give permission to designated personnel to give medication if needed to this student at school or school sponsored event, including when away from school property on overnight field trips, according to the written instructions on this form.

_____
Initials

Other special circumstances (for example in a foreign country a surrogate/host parent authorized to give medication)

_____
_____
_____
_____

Section 3: Permission to Administer Stock Medications

As a courtesy to our students, the district offers the following stock (over-the-counter) medication: Advil (ibuprofen), Tylenol (acetaminophen), and Benadryl (diphenhydramine) for use on overnight field trips. Stock medication is in tablet form only. A parent/guardian must provide chewable or liquid medication, if his/her child is unable to swallow tablets.

In case of minor injury or illness during the overnight field trip, I authorize the medical personnel or supervising teacher to be my agent to give my child the appropriate dosage as directed on the packaging of the over-the-counter medication listed below. I understand alternate methods of care will be used before medication is given (i.e., eating, hydration, resting, etc.). I agree to, and do hereby hold the district and its employees harmless from any and all claims, demands, causes of action, liability, or loss of any sort, because of or arising out of acts or omissions with respect to this medication.

PLEASE INITIAL NEXT TO THE MEDICATIONS YOU ARE AUTHORIZING FOR ADMINISTRATION

I understand that ONLY the over-the-counter medications listed below will be available. All other non-prescription medication must be brought to the health office by a parent/guardian in a manufactured labeled container.

Parent Initials	**Medication**
_____	Advil (ibuprofen) 200mg tablet:1-2 tablets by mouth every 6-8 hours
_____	Tylenol (acetaminophen) 325mg tablet:1-2 tablets by mouth every 4-6 hours
_____	Benadryl (diphenhydramine) 25mg tablet:1-2 tablets by mouth every 4-6 hours

In the event of a medical emergency, 911/Emergency Medical Services will be called and student will be transferred to the nearest medical facility. I understand the arrangements and believe that the necessary precautions and plans for the supervision of my child during the field trip will be taken. Beyond this we will not hold the school or those supervising the trip responsible. I give consent for my child to go on this trip. I have read and understood the information booklet.

Student (sign here): _____ Date: _____

Parent/Guardian: _____ Date: _____

Signature

REVIEWED: May 27, 2015

Shorewood Intermediate School
SCHOOL DISTRICT OF SHOREWOOD
1701 E. Capitol Drive
Shorewood, WI 53211
414-963-6951

352.1 Exhibit (5)

TRAVEL INSURANCE
Costa Rica Trip 2027

The Shorewood School District does not carry any type of travel insurance coverage for participants, therefore it is encouraged that parents/guardians consider purchasing travel insurance for your child.

The opportunity to purchase travel insurance for the Costa Rica Trip, for 9 days between August 2-19, 2027, can be purchased through your insurance company.

PLEASE CHECK ONE

_____I have obtained travel insurance. Initial _____ Date _____

_____I am declining travel insurance. Initial _____ Date _____

_____	_____	_____
Print Student Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 1 Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 2 Name	Signature	Date

REVIEWED: August 14, 2012

Shorewood Intermediate School
SCHOOL DISTRICT OF SHOREWOOD
1701 E. Capitol Drive
Shorewood, WI 53211
414-963-6951

352.1 Exhibit (6)

DEVIATION FORM
Costa Rica Trip 2027

The Shorewood School District will arrange transportation throughout the trip. If a parent/guardian requests to provide transportation for their child to/from the destination or during the trip, this form must be completed. Students may not provide their own transportation.

The parent/guardian is responsible for their child when removed from the School District's trip.

The parent/guardian explanation of the deviation from the School District's proposed trip itinerary:

_____	_____	_____
Print Student Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 1 Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 2 Name	Signature	Date
_____	_____	_____
Print District Employee Name	Signature	Date

REVIEWED: August 14, 2012

Shorewood Intermediate School
SCHOOL DISTRICT OF SHOREWOOD
1701 E. Capitol Drive
Shorewood, WI 53211
414-963-6951

352.1 Exhibit (7)

AUTHORIZATION/PERMISSION FOR MINOR TO TRAVEL WITH SCHOOL GROUP
Costa Rica Trip 2027

I acknowledge that _____has my consent to travel with the Costa Rica Trip 2027. They have my permission to do so.

_____	_____	_____
Print Parent/Guardian 1 Name	Signature	Date
_____	_____	_____
Print Parent/Guardian 2 Name	Signature	Date

State of _____, County of _____

On this _____ day of _____, 20_____.

before me personally came _____ known to me and known by me

to be the parent/guardian of _____.

.

Notary Public, State of _____

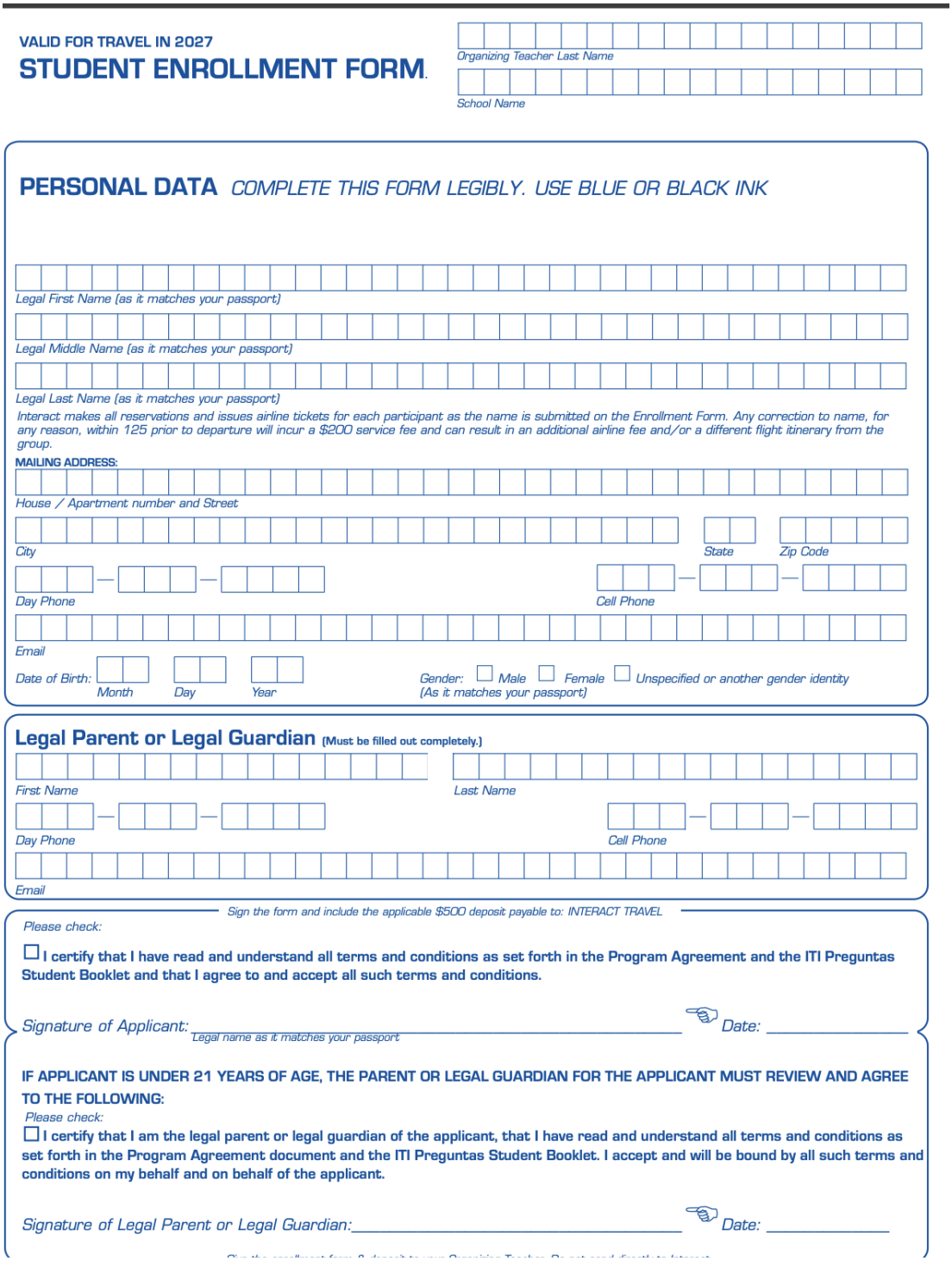
My commission expires _____

REVIEWED: August 14, 2012

Shorewood Intermediate School
SCHOOL DISTRICT OF SHOREWOOD
1701 E. Capitol Drive
Shorewood, WI 53211
414-963-6951

Appendix A: Links to and PDFs of the proposed written vendor/travel agent contracts, which will be made available to parents/guardians. These are subject to travel agency revision until the date signed:

Enrollment Form: https://interact-travel.com/Preguntas2027_Student.pdf (Page 15)



VALID FOR TRAVEL IN 2027

STUDENT ENROLLMENT FORM

Organizing Teacher Last Name

School Name

PERSONAL DATA *COMPLETE THIS FORM LEGIBLY. USE BLUE OR BLACK INK*

Legal First Name (as it matches your passport)

Legal Middle Name (as it matches your passport)

Legal Last Name (as it matches your passport)

Interact makes all reservations and issues airline tickets for each participant as the name is submitted on the Enrollment Form. Any correction to name, for any reason, within 125 prior to departure will incur a $200 service fee and can result in an additional airline fee and/or a different flight itinerary from the group.

MAILING ADDRESS:

House / Apartment number and Street

City State Zip Code

Day Phone Cell Phone

Email

Date of Birth: Month Day Year

Gender: ☐ Male ☐ Female ☐ Unspecified or another gender identity (As it matches your passport)

Legal Parent or Legal Guardian (Must be filled out completely.)

First Name Last Name

Day Phone Cell Phone

Email

Sign the form and include the applicable $500 deposit payable to: INTERACT TRAVEL

Please check:

☐ I certify that I have read and understand all terms and conditions as set forth in the Program Agreement and the ITI Preguntas Student Booklet and that I agree to and accept all such terms and conditions.

Signature of Applicant: _____ Date: _____

Legal name as it matches your passport

IF APPLICANT IS UNDER 21 YEARS OF AGE, THE PARENT OR LEGAL GUARDIAN FOR THE APPLICANT MUST REVIEW AND AGREE TO THE FOLLOWING:

Please check:

☐ I certify that I am the legal parent or legal guardian of the applicant, that I have read and understand all terms and conditions as set forth in the Program Agreement document and the ITI Preguntas Student Booklet. I accept and will be bound by all such terms and conditions on my behalf and on behalf of the applicant.

Signature of Legal Parent or Legal Guardian: _____ Date: _____

Waiver and Release: https://interact-travel.com/Preguntas2027_Student.pdf (Page 14)

INTERACT WAIVER AND RELEASE

INTERACT TRAVEL, INC. : WAIVER AND RELEASE OF LIABILITY AGREEMENT 2027

I. PARTICIPATION IN AN INTERACT TRAVEL PROGRAM

The undersigned, being the parent or legal guardian of the student described below (the "Student"), represents that he/she has the authority to enter into this Waiver and Release and hereby gives permission for the Student to participate in an international travel program ("Program") organized or offered by Interact Travel, Inc., a Wisconsin corporation. The undersigned acknowledges and agrees that he/she is also signing this Waiver and Release on behalf of the Student, who is undersigned's child or ward. If my Student is eighteen (18) years of age or older, or if my Student attains the age of eighteen (18) years prior to the Program's departure, he/she must also agree to the terms and conditions of this Waiver and Release by signing the "Student Agreement & Acknowledgement" below. For purposes of this Waiver and Release, Interact Travel, Inc. includes all owners, officers, directors, employees, agents, representatives, assigns, successors, insurers, subsidiaries and affiliates of Interact Travel, Inc. (collectively, the "Released Parties").

II. EXPRESS ASSUMPTION OF RISK

This Waiver and Release is applicable to the Student's participation in the Program and all events and activities relating to the Program. The undersigned acknowledges that participation in the Program may involve significant known and unknown risks of bodily injury, property damage, and other dangers associated with international travel as well as educational and homestay programs. The undersigned understands and agrees that the Student's participation in the Program and its related events and activities is completely voluntary, and the undersigned assumes all risk of injury, illness, damage or loss that might result from the Student's participation in the Program, even if the risks arise out of the negligence of Interact Travel, Inc.

III. WAIVER/RELEASE OF LIABILITY

BY THE EXECUTION OF THIS WAIVER AND RELEASE, THE UNDERSIGNED AGREES THAT AS THE PARENT OR LEGAL GUARDIAN OF THE STUDENT, AND IN CONSIDERATION FOR MY STUDENT BEING PERMITTED TO PARTICIPATE IN THE PROGRAM AND ANY AND ALL EVENTS OR ACTIVITIES THAT ARE OR MIGHT BE ASSOCIATED WITH THE PROGRAM, THE UNDERSIGNED AGREES ON BEHALF OF THE UNDERSIGNED, HIS/HER STUDENT AND EACH OF OUR RESPECTIVE FAMILY MEMBERS, HEIRS AND ASSIGNS TO RELEASE, WAIVE, DISCHARGE AND HOLD HARMLESS INTERACT TRAVEL, INC. AND THE RELEASED PARTIES FROM AND AGAINST ANY AND ALL RIGHTS, CLAIMS, DEMANDS, CAUSES OF ACTION, OBLIGATIONS, SUITS, PROCEEDINGS, LIENS, DAMAGES, INJURIES, LOSSES, LIABILITIES, COSTS OR EXPENSES OF ANY KIND AND CHARACTER (INCLUDING ACTUAL ATTORNEYS' FEES AND OTHER COSTS OF LITIGATION), WHETHER KNOWN OR UNKNOWN, FORESEEN OR UNFORESEEN, SUSPECTED OR CLAIMED THAT COULD BE BROUGHT BY THE UNDERSIGNED OR THE STUDENT OR A THIRD PARTY ACTING ON THEIR BEHALF ARISING FROM OR RELATING TO THE PROGRAM, MY STUDENT'S PARTICIPATION IN THE PROGRAM, AND ALL EVENTS AND ACTIVITIES RELATING TO THE PROGRAM. THE UNDERSIGNED ASSUMES FULL RESPONSIBILITY FOR ANY SUCH LOSSES, INJURIES, DAMAGES, COSTS OR EXPENSES WHICH MAY OCCUR AS A RESULT OF THE PROGRAM, AND FURTHER AGREES THAT INTERACT TRAVEL, INC. SHALL NOT BE LIABLE FOR ANY LOSS OR THEFT OF PERSONAL PROPERTY. THE UNDERSIGNED SPECIFICALLY AGREES THAT NEITHER INTERACT TRAVEL, INC. NOR THE RELEASED PARTIES SHALL BE LIABLE OR RESPONSIBLE FOR ANY SUCH LOSSES, INJURIES, DAMAGES, COSTS, EXPENSES OR THEFT, EVEN IN THE EVENT OF NEGLIGENCE BY INTERACT TRAVEL, INC. HOWEVER, THIS WAIVER AND RELEASE DOES NOT APPLY TO INTENTIONAL CONDUCT BY INTERACT TRAVEL, INC. OR ANY OF THE RELEASED PARTIES.

IV. ACKNOWLEDGMENT OF WAIVER AND RELEASE

The undersigned acknowledges that by signing below, he/she and his/her Student are giving up substantial legal rights that they may otherwise have and that they may be incurring legal liabilities they would not otherwise have. The undersigned states that he/she has had sufficient time to review this Waiver and Release with competent legal counsel of their choice. The undersigned further states that he/she has carefully read the foregoing Waiver and Release, knows the contents thereof, and has signed this Waiver and Release as his/her own free act. The undersigned understands that his/her execution of this document or a substitute document approved in writing by the Travel Director of Interact Travel, Inc., who is currently Jennifer Koss Conger (tel. 920-434-2100; e-mail: jennifer@interact-travel.com) or her successor ("Interact Travel Officer"), on behalf of Interact Travel, Inc. is required for the Student's participation in the Program and all events or activities relating thereto. The undersigned understands that he/she has the opportunity to speak to the Interact Travel Officer if the undersigned has any questions regarding his/her rights under this document or to negotiate the terms of this document and agree upon an alternative to this document acceptable to the undersigned and Interact Travel, Inc., and that he/she has the authority to approve and execute any alternative to this document. No such alternative document is valid unless approved and signed by the Interact Travel Officer and the undersigned. By executing this document, the undersigned warrants that he/she is fully aware that he/she and his/her Student are waiving any right they may have to bring a legal action to assert a claim against Interact Travel, Inc. for negligence.

VI. SEVERABILITY

The undersigned hereby agrees that in the event any term or any part of any term of this Waiver and Release is determined to be void or unenforceable, such term or part of a term shall be considered separate and severable from this Waiver and Release and the remaining terms shall continue in full force and effect.

*****READ THIS WAIVER AND RELEASE BEFORE SIGNING*****

PARENT/LEGAL GUARDIAN ACKNOWLEDGMENT & AGREEMENT

_____

(Signature)

Printed Legal Name:_____

Student's Legal Name: _____

Date Signed:_____

STUDENT ACKNOWLEDGMENT & AGREEMENT

(only if 18 years of age or older)

By signing below, I acknowledge that I am 18 years of age or older and that I agree to be bound by all of the terms and provisions stated in this Waiver and Release of Liability Agreement, and that all references in this Waiver and Release to the "the undersigned" and "Student" shall refer to and include me.

_____

(Signature)

Student's Legal Name:_____

Date Signed:_____

STUDENT ACKNOWLEDGMENT & AGREEMENT

(only if 17 years of age or younger)

By signing below, I acknowledge that I am 17 years of age or younger and that I agree to be bound by all of the terms and provisions stated in this Waiver and Release of Liability Agreement, and that all references in this Waiver and Release to the "the undersigned" and "Student" shall refer to and include me.

_____

(Signature)

Student's Legal Name:_____

Date Signed:_____

INTERACT

ST17UValid 2027

Interact Travel - 2207 Velp Avenue, Green Bay, Wisconsin, 54303

Program Agreement: https://interact-travel.com/Preguntas2027_Student.pdf (Page 1 of 2)

INTERACT PROGRAM AGREEMENT

INTERACT TRAVEL, INC. : PROGRAM AGREEMENT 2027

As the parent or legal guardian of a student ("Student") participating in an international travel program ("Program") organized or offered by Interact Travel, Inc., a Wisconsin corporation ("ITI"), I agree to the terms and conditions stated in this Program Agreement, for myself and on behalf of my Student. If my Student is eighteen (18) years of age or older, or if my Student attains the age of eighteen (18) years prior to the Program's departure, he/she must also agree to the terms and conditions of this Program Agreement by signing the "Student Program Agreement Acknowledgement" below.

1. I HEREBY AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS ITI AND ITS OWNERS, OFFICERS, DIRECTORS, EMPLOYEES, AND AGENTS, MY LOCAL SCHOOL AND SCHOOL DISTRICT, AND THE ORGANIZING TEACHERS AND OFFICIAL ASSISTANTS FROM AND AGAINST ALL CLAIMS, DEMANDS, LOSSES, LIABILITIES, DAMAGES, INJURIES, CAUSES OF ACTION, SUITS, PROCEEDINGS, COSTS AND EXPENSES, INCLUDING REASONABLE ATTORNEYS FEES AND OTHER COSTS OF LITIGATION (COLLECTIVELY, "CLAIMS") ARISING FROM OR CONNECTED WITH: (A) ANY BREACH OR VIOLATION OF THIS PROGRAM AGREEMENT BY ME OR MY STUDENT, OR (B) ANY ACT OR OMISSION THAT I OR MY STUDENT COMMITS OR ENGAGES IN WHILE PARTICIPATING IN THE PROGRAM, EXCEPT TO THE EXTENT THAT ANY CLAIM ARISES FROM ITI'S INTENTIONAL CONDUCT.

2. ITI'S MAXIMUM LIABILITY UNDER THIS PROGRAM AGREEMENT SHALL BE LIMITED TO THE TOTAL AMOUNT PAID BY ME FOR THE PROGRAM. FURTHER, I AGREE THAT ITI SHALL NOT BE RESPONSIBLE OR LIABLE FOR LOSS OF MY STUDENT'S PASSPORT, AIRLINE TICKETS, OR OTHER TRAVEL DOCUMENTS, OR FOR ANY LOSS OR DAMAGE TO MY OR MY STUDENT'S LUGGAGE OR PERSONAL BELONGINGS. IN NO EVENT SHALL ITI BE LIABLE FOR ANY CONSEQUENTIAL, INDIRECT, SPECIAL, INCIDENTAL, ENHANCED, EXEMPLARY OR PUNITIVE DAMAGES SUCH AS, WITHOUT LIMITATION, LOST PROFITS, REVENUE OR WAGES.

3. I understand and agree that the Waiver and Release of Liability Agreement separate from the Interact Preguntas Student Booklet constitutes a part of and is incorporated by reference into this Program Agreement.

4. Each Program begins with the takeoff of the international flight and ends upon completion of the return flight to the United States. I agree that ITI has the right to: (a) select all accommodations to be used in connection with the Program, to include hotels and homestays with families in the countries that are included in the Program; and (b) designate room and roommate assignments for my Student during the Program.

5. ITI shall not be liable for or deemed to be in breach or default of this Program Agreement due to any event beyond ITI's control, including, without limitation, acts of God, hurricane, floods, natural disasters, war (whether declared or undeclared), acts of terrorism, riots, civil unrest, strikes, labor troubles, epidemics, pandemics, bacterial or viral outbreaks, emergency orders or proclamations, quarantine restrictions, acts or restrictions of government bodies or authorities, shortage or unavailability of transportation, restrictions or delay caused by persons or entities not controlled by ITI, such as airlines, bus companies, railways, and hotels, or any other cause beyond ITI's control, whether or not similar in type or nature to the previously listed events.

6. ITI reserves the right to suspend or terminate my Student's participation in the Program at any time for violations of this Program Agreement or the ITI Code of Conduct stated at page 3 of the Interact Preguntas Student Booklet (the "Code of Conduct"), which is incorporated by reference into this Program Agreement, or for any other justifiable reason. ITI SHALL HAVE THE RIGHT, WITHOUT ADVANCE NOTIFICATION TO ME, WITHOUT ESCORT OR REFUND, AND AT MY EXPENSE, TO SEND MY STUDENT HOME IF HE/SHE IS UNDER THE AGE OF 21 AND DRINKS OR SAMPLES ALCOHOLIC BEVERAGES, USES ILLEGAL DRUGS, OR VIOLATES THE ITI CODE OF CONDUCT. ITI DOES NOT ACCEPT PARENTAL PERMISSION FORMS AUTHORIZING THEIR SON/DAUGHTER TO DRINK OR SAMPLE ALCOHOLIC BEVERAGES. FURTHERMORE, I AM ADVISED THAT THEFT OR USE AND/OR POSSESSION OF ILLEGAL DRUGS CONSTITUTES A VIOLATION OF LOCAL, STATE, FEDERAL OR FOREIGN LAW AND MAY BE PUNISHABLE BY IMMEDIATE IMPRISONMENT. CONSULAR INTERVENTION WILL NOT BRING ABOUT THE RELEASE OF THE OFFENDER.

7. I understand that the Program is a supervised program and agree that my Student is subject to the authority of his/her Organizing Teacher at all times during the Program. As used in this Program Agreement, "Organizing Teacher" means any Spanish teacher who organizes, oversees, and participates in the Program, and "Official Assistant" means any adult selected by the Organizing Teacher to assist with and participate in the Program. I further agree that ITI has the right to enforce the Code of Conduct. In addition, my Student agrees to stay in his or her assigned hotel room/home from 10 p.m. to 7 a.m. local time unless he/she is with an Organizing Teacher, host family, or unless an emergency exists. I understand and agree that if my Student fails to abide by any of these policies, a collect phone call will be made to me by the Organizing Teacher or ITI. If ITI deems it appropriate, I agree that ITI may send my Student home without escort, at my expense, with no refund granted. I agree to promptly reimburse ITI for any costs or expense it incurs in connection with the enforcement of this Section 7 or the Code of Conduct.

8. I understand that if my Student is expelled or suspended from school or otherwise disciplined by his/her Organizing Teacher, school or by local authorities, or if my Student is charged with or convicted of any crime, or if my Student fails to meet any requirements for participation in the Program, as established by ITI or his/her Organizing Teacher or school, then my Student will be declared ineligible to participate in the Program and I will be subject to ITI's cancellation policies described in Section 2(a) below entitled "CANCELLATION BY PARENT/LEGAL GUARDIAN/STUDENT".

9. If my Student becomes ill or incapacitated, I agree that ITI may take whatever action it deems necessary to preserve his/her health and safety including, without limitation, obtaining medical treatment for him/her at my expense, and/or transporting my Student at my expense back to my home for medical treatment. ITI is not responsible for the quality and timeliness of any such medical treatment received by my Student. I agree to pay any costs or expenses incurred on my behalf by ITI for medical treatment or other reasons relating to my Student. If ITI incurs or pays for any such costs or expenses, I will reimburse ITI immediately upon my Student's return. I also agree to reimburse ITI for all costs of collection, including reasonable attorney's fees and costs of litigation, relating to payment of medical expenses or any other amount due to ITI under this Program Agreement.

10. I agree that ITI is not responsible for my Student's safety or well-being when he/she is absent from ITI-supervised activities. I shall be exclusively liable for any financial obligations my Student may incur or any damage or injury my Student may cause while participating in the Program, including any claim, loss, damage or injury resulting from my Student's negligent or intentional conduct.

11. I agree that any photograph, video, image, likeness, or any other means by which my Student may be recorded or recognized while participating in the Program, and any of my or my Student's comments or statements regarding the Program, may be used (without compensation to me or my Student) in future advertising or marketing materials produced, published or displayed by ITI in any form or medium.

12. I certify that my Student is in good physical and mental health and that he/she has no special medical or physical conditions, nor any special needs or requirements, which would impede participation in the Program, or be of any harm or inconvenience to my Student or the other participants in the Program.

13. I agree that I and my Student are solely responsible, at our expense, for: (a) obtaining and carrying proper travel documents, and if he/she is not a U.S. citizen, the appropriate visas for countries he/she is to visit as part of the Program; and (b) complying with all health-related laws and requirements mandated by any applicable governmental body or authority, to include, if applicable, maintaining required health insurance and/or demonstrating proof of a timely negative COVID-19 test. Further, I shall hold ITI harmless if I or my Student are unable to obtain the necessary documents for participation in the Program. I understand that inability to obtain these visas or other documents does not constitute grounds for withdrawal or cancellation from the Program with a full refund, and that the cancellation policies stated in Section 25(a) below entitled "CANCELLATION BY PARENT/LEGAL GUARDIAN/STUDENT" shall apply.

14. I grant to ITI the right to select or approve of a replacement for my Organizing Teacher if he or she is unable or unwilling to participate in the Program.

15. I understand that if events outside ITI's control require a change in the complete student fees, my Organizing Teacher will receive written notification with available options and deadlines.

16. I agree that ITI reserves the right to determine airlines and flight routings.

Program Agreement: https://interact-travel.com/Preguntas2027_Student.pdf (Page 2 of 2)

INTERACT PROGRAM AGREEMENT (CON'T)

17. I agree that ITI and/or the air carrier have the right to substitute airlines, to make changes in equipment, in the published itinerary, in the departure and arrival dates, times, or cities, or to alter the itinerary and I agree to accept any such changes. Further, ITI shall have the right to change the Program itinerary and/or to reschedule the Program to a later departure date, school year or travel season if, in ITI's sole judgment, rescheduling the Program is necessary to protect the health or safety of my Student or is due to circumstances beyond ITI's control. No refunds will be made in the event of changes in the itinerary occurring prior to or after departure, or in the event of a rescheduled Program.

18. I understand that all information pertaining to my Student's Program, including statements and air tickets, are emailed directly to my Organizing Teacher.

19. This Program Agreement may not be modified except in writing signed by me and an authorized ITI representative. This Program Agreement shall be governed by, construed and enforced in accordance with the laws of the State of Wisconsin, without regard to conflict of law principles. All disputes, claims, causes of actions, or counterclaims regarding the breach, enforcement or interpretation of this Program Agreement shall be initiated and prosecuted exclusively in the state or federal courts having jurisdiction over Brown County, Wisconsin. I consent to the jurisdiction and venue of such courts and expressly waive all objections based on the doctrines of personal jurisdiction or inconvenient forum. I KNOWINGLY, VOLUNTARILY AND INTELLIGENTLY WAIVE MY CONSTITUTIONAL RIGHT TO A TRIAL BY JURY WITH RESPECT TO ANY DISPUTES, CLAIMS, CAUSES OF ACTIONS, OR COUNTERCLAIMS THAT MAY ARISE OUT OF THE PROGRAM OR THIS PROGRAM AGREEMENT AND AGREE THAT ANY LITIGATION BETWEEN THE PARTIES CONCERNING THIS PROGRAM AGREEMENT SHALL BE HEARD BY A COURT DESCRIBED IN THIS SECTION SITTING WITHOUT A JURY. I HEREBY CONFIRM THAT I HAVE REVIEWED THE EFFECT OF THIS PROGRAM AGREEMENT, TO INCLUDE THE WAIVER OF JURY TRIAL, WITH COMPETENT LEGAL COUNSEL OF MY CHOICE, OR HAVE BEEN AFFORDED THE OPPORTUNITY TO DO SO, PRIOR TO SIGNING THIS PROGRAM AGREEMENT.

20. I understand that ITI does not investigate or actively monitor the Organizing Teacher and Official Assistants. Instead, I shall perform any investigations, background checks, interviews and the like that I determine, in my sole discretion, are necessary prior to my Student's participation in the Program, provided that such investigations and checks are conducted in accordance with all applicable laws. ITI HEREBY DISCLAIMS ALL REPRESENTATIONS AND WARRANTIES REGARDING ANY ORGANIZING TEACHER AND OFFICIAL ASSISTANTS, WHETHER EXPRESS OR IMPLIED, INCLUDING, WITHOUT LIMITATION, ANY REPRESENTATION OR WARRANTY REGARDING THE CHARACTER OR BACKGROUND OF AN ORGANIZING TEACHER AND OFFICIAL ASSISTANTS.

21. I agree to notify ITI, in writing, as soon as possible if I or my Student suffer or incur any loss, damage or injury arising out of the Program; provided that no demand, claim, or cause of action, regardless of form, arising out of the Program or this Program Agreement may be brought by me or my Student, or anyone on our behalf, against ITI more than one (1) year after the date on which the demand, claim or cause of action accrued.

22. All of the terms and conditions of the Interact Preguntas Student Booklet are incorporated herein by reference and made a part of this Program Agreement. In the event of any conflict between the provisions of this Program Agreement and the Interact Preguntas Student Booklet, the provisions of this Program Agreement shall control.a

23. Time is of the essence with respect to all payment deadlines. I acknowledge and agree that ITI may terminate this Agreement and my Student's participation in the Program may be cancelled, in ITI's sole discretion, if I miss any payment deadline.

24. ITI has the right to terminate this Agreement at any time, without cause, by providing me with a 7-day written notice of termination. In such event, I shall be entitled to a refund equal to the amount determined in accordance with Sections 25(c)(1) and 25(c)(2) below.

25. CANCELLATION/REFUND POLICY

a. **Cancellation by Parent/Legal Guardian/Student**
If I wish to voluntarily cancel my participation in the Program, I must notify ITI in writing of such cancellation at interact@interact-travel.com. The cancellation date is determined by the date that ITI confirms my written notice of cancellation. If I voluntarily cancel my participation in the Program, the following cancellation/refund policies shall apply:

1. **CANCELLATION WITH IMMEDIATE REPLACEMENT**:
If I cancel my participation in the Program by no later than 125 days prior to the Program departure date and I locate a replacement student suitable to the Organizing Teacher, I will be entitled to a refund of all amounts previously paid by me to ITI, less a $250 processing fee. ITI's official form to propose a replacement should be obtained from the Organizing Teacher. I understand that I am solely responsible for locating a replacement student but all decisions and approvals regarding the suitability of the proposed replacement shall be made by the Organizing Teacher. The replacement must also complete and submit all ITI-required agreements and documents as a condition to participating in the Program.

2. **STANDARD CANCELLATION (NO REPLACEMENT):**
(A) for any cancellation by me more than 125 days prior to the Program departure date, $500 plus the adult fee (if applicable), is non-refundable and non- transferable, (B) for any cancellation by me from 125 through 50 days prior to the Program departure date, $850 plus the adult fee (if applicable) is non-refundable and non-transferable, all optional tour fees are non-refundable and non-transferable, and possible airline, touring, and hotel penalties may also apply, which I shall be responsible for; and (C) for any cancellation by me 50 days or less prior to the Program departure date, I shall not be entitled to any refund from ITI.

b. **Cancellation by the Organizing Teacher or School:**
Cancellation of the Program by the Organizing Teacher or school, for any reason, shall not be considered a cancellation by ITI. Instead, any cancellation of the Program by the school or Organizing Teacher shall be considered a cancellation by me and the cancellation/refund policy stated in Section 25(a)(2) above shall apply.

c. **Cancellation by ITI:**
I agree that ITI has the right to cancel the Program at any time if ITI determines, in its sole discretion, that cancellation is necessary to protect the health, safety or welfare of me or other participants of the Program, including, without limitation, if the U.S. Department of State issues a Level 4 travel advisory or warning (or any notice equivalent to a "Do Not Travel" advisory) for a country included in the Program. We also acknowledge that, in preparation for the Program, ITI will be required to make payments to airlines, bus companies, railways, hotels, and other vendors (each a "Vendor") using amounts paid by you to ITI and that such vendor payments may be non-refundable to ITI or to you. Interact strongly recommends that you purchase travel insurance with a "Cancel for Any Reason" option. If ITI cancels the Program in accordance with this Section 25(c), ITI will promptly notify the Organizing Teacher in writing and the Organizing Teacher will be responsible for providing all cancellation notices and information to me. The cancellation date is determined by the date that ITI sends written notice of the cancellation. In the event of such cancellation, ITI shall engage in commercially reasonable efforts to seek refunds of amounts previously paid to Vendors but ITI cannot guarantee such payments will be refunded to ITI. You agree that the maximum refund you will receive from ITI if ITI cancels the Program in accordance with this Section 25(c) shall be: (1) those amounts paid by you which ITI is holding as of the date of cancellation, plus (2) your pro-rata portion of any refund that ITI is able to obtain from Vendors, provided, however, such pro-rata refund is only with respect to amounts paid by you prior to the date of cancellation, less (3) a processing fee of $525.00 plus the adult fee (if applicable). I agree that the maximum refund amount stated in the preceding sentence is reasonable and fair in light of the fact that payments to Vendors may be non-refundable to ITI.

Additional detail is found on the travel agency's website, and in the ¿Preguntas? (Questions?) Packet provided by the travel agency for parent questions:
https://interact-travel.com/Preguntas2027_OTOA.pdf

Appendix B: Proposed itinerary with dates, times and activities (Dates and order of activities will change but the activities themselves and approximate schedule will remain the same.)

Grupo: Sara Kitzinger Anton
Participantes: TBD
Programa: Custom Amistad Alajuela Homestay - **Volcan Poas**

2027 Sample Activities Schedule

5.14.26

	SERVICE	TIME
DAY 1	Bienvenidos a Costa Rica. Arrival Flight	
	Your staff-guide greets you when you exit the airport lobby with your luggage	
	Brief Program Orientation. Meet your homestay family	
	Your staff-guide confirms details for luggage deliver	
	Dinner in your homestay family (pending flight arrival time)	
	Rancho Homestay Program 1. Night	
DAY 2	Breakfast in your homestay family	7:00 AM
	Ask your family for a carry along lunch	
	Spanish Instruction at Rancho de Español	8am-12pm
	Coffee Break	10:00 AM
	Group1: Interaction-Costa Rica cooking class (será parte de la clase de español)	9:00 AM
	Group2: Interaction-Costa Rica cooking class (será parte de la clase de español)	11:00 AM
	Depart to La Garita Town	2:30 PM
	Visit ZooAVE: rehab center for injured animals	3:30 PM
	Arrival to meeting points	6:00 PM
	Dinner in your homestay family	7:00 PM
	Rancho Homestay Program 2. Night	
DAY 3	Breakfast in your homestay family	7:00 AM
	Spanish Instruction at Rancho de Español	8am-12pm
	Coffee Break	10:00 AM
	Lunch at El Rancho	12:00 PM
	SOMOS: Stop at a local store to buy donations (budget $10+ per participant; not included)	1:00 PM
	InterAction Day 1: Escuela & Kinder EL ROBLE- plant, paint, interact with children	2:30 PM
	Arrival to meeting points	5:30 PM
	Dinner in your homestay family	7:00 PM
	Rancho Homestay Program 3. Night	
DAY 4	Breakfast in your homestay family	7:00 AM
	Ask your family for a carry along lunch	
	Spanish Intruction at Rancho de Español	8am-12pm
	Poas Volcano National Park Tour	1:00 PM
	Arrive to meeting points	6:00 PM
	Dinner in your homestay family	7:00 PM
	Rancho Homestay Program 4. Night	
DAY 5	Breakfast in your homestay family	7:00 AM
	Spanish Intruction at Rancho de Español	8am-12pm
	Coffee Break	10:00 AM
	Lunch at Rancho	12:00 PM
	Depart to your Humanitarian InterAction	1:00 PM
	InterAction Day 2: Escuela & Kinder EL ROBLE- plant, paint, interact with children	2:00 PM
	Arrive to meeting points	5:30 PM
	Dinner in your homestay family	7:00 PM
	Rancho Homestay Program 5. Night	
DAY 6	Breakfast in your homestay family	6:00 AM
	Depart to Sarapiqui Rain Forest	7:00 AM
	Prepaid Option: Canopy Tour at Hacienda Pozo Azul. *Tip staff directly; not included*	11:30 AM
	Lunch at a local restaurant in Sarapiqui	1:00 PM
	Continue to La Tirimbina Reserve	2:00 PM
	Interaction: Chocolate Adventure Tour	3:00 PM
	Arrive to meeting points	7:00 PM
	Dinner in your homestay family	8:00 PM
	Rancho Homestay Program 6. Night	

Grupo: Sara Kitzinger Anton
Participantes: TBD
Programa: Custom Amistad Alajuela Homestay - **Volcan Poas**

2027 Sample Activities Schedule

5.14.26

	SERVICE	TIME
DAY 7	Depart to Playa Herradura Dock	6:00 AM
	Tortuga Island Cruise: *up to 1 banana boat ride, snorkel equipment & tour, beach chairs included*	7:15 AM
	(Tip local staff directly; not included)	
	Light breakfast on the boat	8:00 AM
	Lunch on the island	12:00 PM
	Arrive to meeting points	7:00 PM
	Dinner in your homestay family	8:00 PM
	Rancho Homestay Program 7. Night	
DAY 8	Luggage pickup	6:00 AM
	Breakfast in your homestay family	7:00 AM
	Spanish Intruction at Rancho de Español	8am-12pm
	Coffee Break	10:00 AM
	Lunch at Rancho	12:00 PM
	Depart to Alajuela City	1:00 PM
	Explore the Plaza Mayor and Mercado (group scavenger hunt). Sample helados.	2:00 PM
	Interaction: Latino dancing class at El Rancho	5:00 PM
	Dinner at the hotel or in your homestay	6:30 PM
	Alajuela Hotel	
DAY 9	Breakfast pending flight time	
	Airport departure for Flight TBD. Buen viaje.	
	Tips to your primary staff-guide and driver are included.	

Appendix C: Proposed agenda for a parent/guardian and student orientation meeting

Costa Rica 2027 Informational Meeting: Date TBA

-Introductions and Overview of Costa Rica: Families, kids, teacher

-Payment Schedule:
- -When to submit
- -Please address to Profe. Anton and turn in to SIS
- -Please read contacts provided carefully for refund policies

-Packet Review: Printed packet: (Also scanned and uploaded in Google Classroom)
1. Sara Anton's Contact Information (White, 1 page)
2. Itinerary for Travelers (Pink, 1 page)
3. Basic Flight Information (Yellow, 1 page)
4. Using Google Classroom (Blue, 1 page)
5. "Preguntas" Booklet Copies (Green, 8 pages, double-sided)
6. Health and medication packet and recommendations (Option A, only provided OTC medications, etc.)

-Fundraising
- -Coffee sale
- -Discussion: Crowdsource funding
  - -For students with financial need
  - -Privacy and logistics
- -Student leadership roles in securing funds
- -Other fundraising ideas?

-Introduction to Google Classroom
- -Purpose of Google Classroom leading up to trip
- -Student e-mails and passwords provide access
- -Posting and commenting
- -Student "Assignments" throughout the time preparing for departure
- -Profe Anton facilitating posts while in Costa Rica

-Meeting Schedule
- -With families:
  - -Orientation
  - -End of school year
  - -Within 1 week of departure (dinner)
  - -Approximately 1 week after returning (dinner)
- -Students:
  - -Approximately once a month during Flex Time/Lunch; 4 of 7 are mandatory to travel.
  - -Additional meetings/fundraising opportunities throughout the school year
  - -Goals of establishing positive relationships between peers and as mentors/mentees

-Remaining guardian questions

Appendix D: Application for Costa Rica travel

Name: _____ Email: _____ @shorewood.k12.wi.us

Fill out the following application and submit it to Sara Kitzinger Anton (Profe Anton) by Friday, October 2 at 4:00 pm. Please e-mail your completed application to santon@shorewood.k12.wi.us.

Please note that the travel agency waiver and release and enrollment form must be completed and signed in paper form.

A completed application must include…

- ❏ Your complete personal statements (p. 2 below)
- ❏ The names of all of the teachers you've had for the past 2 years (p. 3 below)
- ❏ The Interact Travel Agency Enrollment Form and Waiver and Release (directions on pp. 4-5 below)
- ❏ Signatures on the Student and Guardian Acknowledgement form (p. 6 below)
- ❏ A check for $500 made out to Interact Travel. If you are not selected to travel, your check will be returned.
- ❏ Second pre-departure notarized document: Interact Travel requires a notarized 1-page document dated within one month of trip departure. This will be provided to all approved travelers during the May mandatory student traveler and guardian meeting.
- ❏ ***Optional: For assistance based on financial need, fill out this application for consideration from the Michael J. Spector Travel Scholarships program and the SIS Costa Rica Travel Fund.

Part 1: Personal Statements

Directions: Answer the three questions below in English. There is no length requirement, but please answer completely and to the best of your ability in the space below each question.

1. Why do you want to attend the Costa Rica Trip? Why do you think it's important to learn about Spanish language and culture?

2. This trip involves service learning and volunteer work. What do you hope to learn while volunteering?

3. The most important part of this trip is safety. If you are selected, this means that your teachers, parents and other adults trust that you will keep yourself and others safe in another country. Explain how following directions and staying safe in school connects to staying safe in Costa Rica.

Part 2: Teachers

Directions: Write the names of all of the teachers you've had for the past 2 years. If they were not at SIS, Atwater or Lake Bluff, also provide email addresses and phone numbers.

All of these teachers will fill out a form about your ability to follow through, demonstrate responsibility and be safe. Your current teachers will also be asked to fill out a similar survey each quarter. Because traveling is a privilege and not a right, negative surveys may disqualify you from your application being accepted to travel. If you are accepted but quarterly surveys show a change in your history of keeping yourself and others safe, you may be disqualified from traveling at any point before we depart for Costa Rica at your own expense.

Last years' teachers / Teachers from the 2025-2026 school year for all classes including homeroom:

_____

_____

_____

_____

Current teachers / Teachers from the 2026-2027 school year for all classes including homeroom:

_____

_____

_____

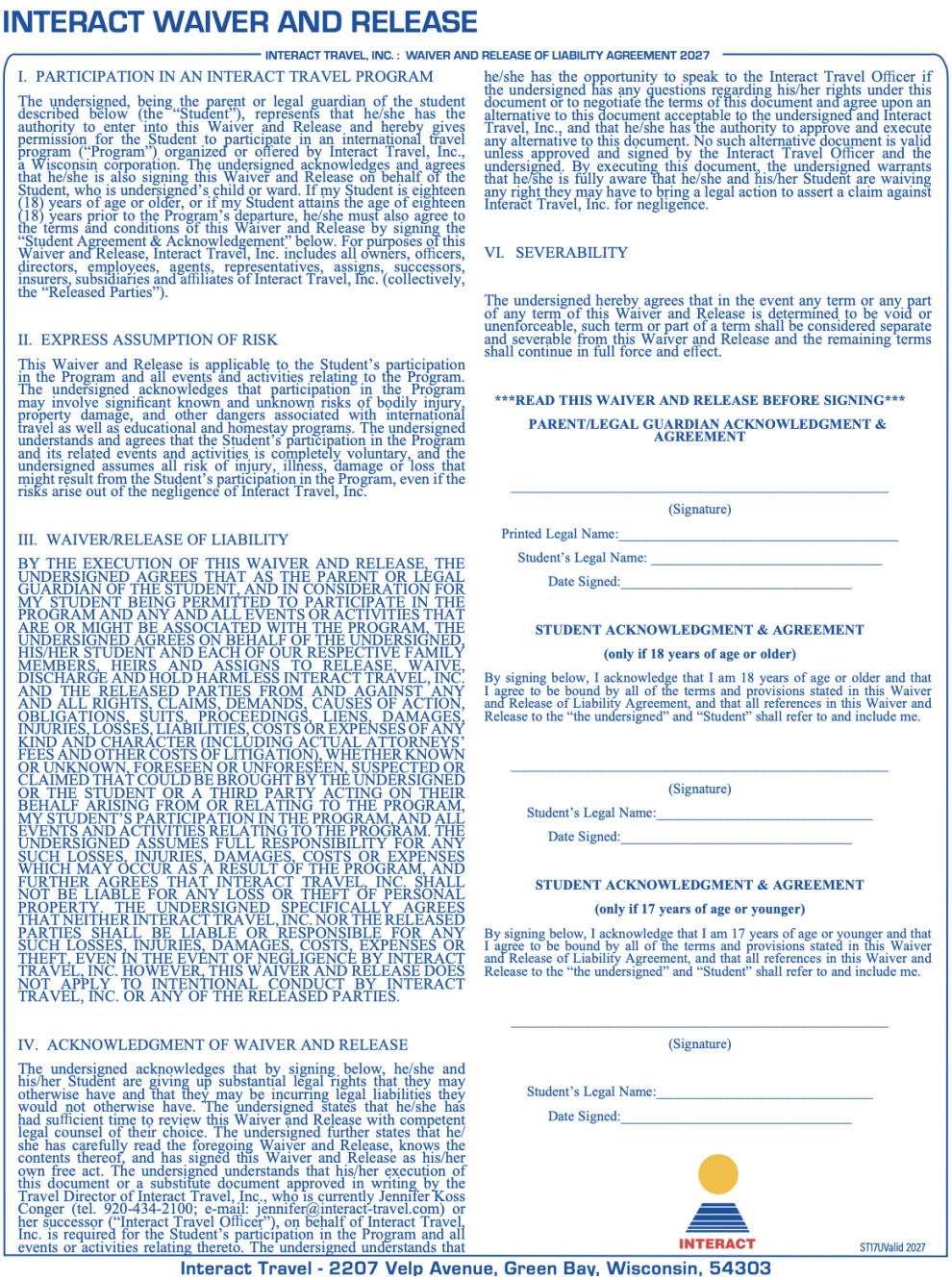
_____

Part 3: Travel Agency Enrollment Form (Next Pages)

Part 3: Travel Agency Enrollment Form 1 of 2: Waiver and Release

Directions: Guardians and students need to print, fill out, sign and submit these documents with the application.

Go to this link→ “Enrollment 2027” → “Student Waiver and Release” → “Student Waiver and Release PDF”, page 2. Read all pages and the “Preguntas” packet. The document you need to sign looks like this:



INTERACT WAIVER AND RELEASE

INTERACT TRAVEL, INC. : WAIVER AND RELEASE OF LIABILITY AGREEMENT 2027

I. PARTICIPATION IN AN INTERACT TRAVEL PROGRAM

The undersigned, being the parent or legal guardian of the student described below (the “Student”), represents that he/she has the authority to enter into this Waiver and Release and hereby gives permission for the Student to participate in an international travel program (“Program”) organized or offered by Interact Travel, Inc., a Wisconsin corporation. The undersigned acknowledges and agrees that he/she is also signing this Waiver and Release on behalf of the Student, who is undersigned’s child or ward. If my Student is eighteen (18) years of age or older, or if my Student attains the age of eighteen (18) years prior to the Program’s departure, he/she must also agree to the terms and conditions of this Waiver and Release by signing the “Student Agreement & Acknowledgement” below. For purposes of this Waiver and Release, Interact Travel, Inc. includes all owners, officers, directors, employees, agents, representatives, assigns, successors, insurers, subsidiaries and affiliates of Interact Travel, Inc. (collectively, the “Released Parties”).

II. EXPRESS ASSUMPTION OF RISK

This Waiver and Release is applicable to the Student’s participation in the Program and all events and activities relating to the Program. The undersigned acknowledges that participation in the Program may involve significant known and unknown risks of bodily injury, property damage, and other dangers associated with international travel as well as educational and homestay programs. The undersigned understands and agrees that the Student’s participation in the Program and its related events and activities is completely voluntary, and the undersigned assumes all risk of injury, illness, damage or loss that might result from the Student’s participation in the Program, even if the risks arise out of the negligence of Interact Travel, Inc.

III. WAIVER/RELEASE OF LIABILITY

BY THE EXECUTION OF THIS WAIVER AND RELEASE, THE UNDERSIGNED AGREES THAT AS THE PARENT OR LEGAL GUARDIAN OF THE STUDENT, AND IN CONSIDERATION FOR MY STUDENT BEING PERMITTED TO PARTICIPATE IN THE PROGRAM AND ANY AND ALL EVENTS OR ACTIVITIES THAT ARE OR MIGHT BE ASSOCIATED WITH THE PROGRAM, THE UNDERSIGNED AGREES ON BEHALF OF THE UNDERSIGNED, HIS/HER STUDENT AND EACH OF OUR RESPECTIVE FAMILY MEMBERS, HEIRS AND ASSIGNS TO RELEASE, WAIVE, DISCHARGE AND HOLD HARMLESS INTERACT TRAVEL, INC. AND THE RELEASED PARTIES FROM AND AGAINST ANY AND ALL RIGHTS, CLAIMS, DEMANDS, CAUSES OF ACTION, OBLIGATIONS, SUITS, PROCEEDINGS, LIENS, DAMAGES, INJURIES, LOSSES, LIABILITIES, COSTS OR EXPENSES OF ANY KIND AND CHARACTER (INCLUDING ACTUAL ATTORNEYS’ FEES AND OTHER COSTS OF LITIGATION), WHETHER KNOWN OR UNKNOWN, FORESEEN OR UNFORESEEN, SUSPECTED OR CLAIMED THAT COULD BE BROUGHT BY THE UNDERSIGNED OR THE STUDENT OR A THIRD PARTY ACTING ON THEIR BEHALF ARISING FROM OR RELATING TO THE PROGRAM, MY STUDENT’S PARTICIPATION IN THE PROGRAM, AND ALL EVENTS AND ACTIVITIES RELATING TO THE PROGRAM. THE UNDERSIGNED ASSUMES FULL RESPONSIBILITY FOR ANY SUCH LOSSES, INJURIES, DAMAGES, COSTS OR EXPENSES WHICH MAY OCCUR AS A RESULT OF THE PROGRAM, AND FURTHER AGREES THAT INTERACT TRAVEL, INC. SHALL NOT BE LIABLE FOR ANY LOSS OR THEFT OF PERSONAL PROPERTY. THE UNDERSIGNED SPECIFICALLY AGREES THAT NEITHER INTERACT TRAVEL, INC. NOR THE RELEASED PARTIES SHALL BE LIABLE OR RESPONSIBLE FOR ANY SUCH LOSSES, INJURIES, DAMAGES, COSTS, EXPENSES OR THEFT, EVEN IN THE EVENT OF NEGLIGENCE BY INTERACT TRAVEL, INC. HOWEVER, THIS WAIVER AND RELEASE DOES NOT APPLY TO INTENTIONAL CONDUCT BY INTERACT TRAVEL, INC. OR ANY OF THE RELEASED PARTIES.

IV. ACKNOWLEDGMENT OF WAIVER AND RELEASE

The undersigned acknowledges that by signing below, he/she and his/her Student are giving up substantial legal rights that they may otherwise have and that they may be incurring legal liabilities they would not otherwise have. The undersigned states that he/she has had sufficient time to review this Waiver and Release with competent legal counsel of their choice. The undersigned further states that he/she has carefully read the foregoing Waiver and Release, knows the contents thereof, and has signed this Waiver and Release as his/her own free act. The undersigned understands that his/her execution of this document or a substitute document approved in writing by the Travel Director of Interact Travel, Inc., who is currently Jennifer Koss Conger (tel. 920-434-2100; e-mail: jennifer@interact-travel.com) or her successor (“Interact Travel Officer”), on behalf of Interact Travel, Inc. is required for the Student’s participation in the Program and all events or activities relating thereto. The undersigned understands that he/she has the opportunity to speak to the Interact Travel Officer if the undersigned has any questions regarding his/her rights under this document or to negotiate the terms of this document and agree upon an alternative to this document acceptable to the undersigned and Interact Travel, Inc., and that he/she has the authority to approve and execute any alternative to this document. No such alternative document is valid unless approved and signed by the Interact Travel Officer and the undersigned. By executing this document, the undersigned warrants that he/she is fully aware that he/she and his/her Student are waiving any right they may have to bring a legal action to assert a claim against Interact Travel, Inc. for negligence.

VI. SEVERABILITY

The undersigned hereby agrees that in the event any term or any part of any term of this Waiver and Release is determined to be void or unenforceable, such term or part of a term shall be considered separate and severable from this Waiver and Release and the remaining terms shall continue in full force and effect.

READ THIS WAIVER AND RELEASE BEFORE SIGNING

PARENT/LEGAL GUARDIAN ACKNOWLEDGMENT & AGREEMENT

_____

(Signature)

Printed Legal Name:_____

Student’s Legal Name: _____

Date Signed:_____

STUDENT ACKNOWLEDGMENT & AGREEMENT

(only if 18 years of age or older)

By signing below, I acknowledge that I am 18 years of age or older and that I agree to be bound by all of the terms and provisions stated in this Waiver and Release of Liability Agreement, and that all references in this Waiver and Release to the “the undersigned” and “Student” shall refer to and include me.

_____

(Signature)

Student’s Legal Name:_____

Date Signed:_____

STUDENT ACKNOWLEDGMENT & AGREEMENT

(only if 17 years of age or younger)

By signing below, I acknowledge that I am 17 years of age or younger and that I agree to be bound by all of the terms and provisions stated in this Waiver and Release of Liability Agreement, and that all references in this Waiver and Release to the “the undersigned” and “Student” shall refer to and include me.

_____

(Signature)

Student’s Legal Name:_____

Date Signed:_____

INTERACT

ST17UValid 2027

Interact Travel - 2207 Velp Avenue, Green Bay, Wisconsin, 54303

Part 3: Travel Agency Enrollment Form 2 of 2: Next Page

Part 3: Travel Agency Enrollment Form 2 of 2: Interact Travel Agency Enrollment Form

Directions: Guardians and students need to print, fill out, sign and submit these documents with the application.

Go to this link→ “Enrollment 2027” → “Student Waiver and Release” → “Preparation, Policies, Enrollment”, page 15. Read all pages and policies. The document you need to sign looks like this:

VALID FOR TRAVEL IN 2027

STUDENT ENROLLMENT FORM

Organizing Teacher Last Name

School Name

PERSONAL DATA *COMPLETE THIS FORM LEGIBLY. USE BLUE OR BLACK INK*

Legal First Name (as it matches your passport)

Legal Middle Name (as it matches your passport)

Legal Last Name (as it matches your passport)

Interact makes all reservations and issues airline tickets for each participant as the name is submitted on the Enrollment Form. Any correction to name, for any reason, within 125 prior to departure will incur a $200 service fee and can result in an additional airline fee and/or a different flight itinerary from the group.

MAILING ADDRESS:

House / Apartment number and Street

City State Zip Code

Day Phone Cell Phone

Email

Date of Birth: Month Day Year

Gender: ☐ Male ☐ Female ☐ Unspecified or another gender identity (As it matches your passport)

Legal Parent or Legal Guardian (Must be filled out completely.)

First Name Last Name

Day Phone Cell Phone

Email

Sign the form and include the applicable $500 deposit payable to: INTERACT TRAVEL

Please check:

☐ **I certify that I have read and understand all terms and conditions as set forth in the Program Agreement and the ITI Preguntas Student Booklet and that I agree to and accept all such terms and conditions.**

Signature of Applicant: _____ Date: _____

Legal name as it matches your passport

IF APPLICANT IS UNDER 21 YEARS OF AGE, THE PARENT OR LEGAL GUARDIAN FOR THE APPLICANT MUST REVIEW AND AGREE TO THE FOLLOWING:

Please check:

☐ **I certify that I am the legal parent or legal guardian of the applicant, that I have read and understand all terms and conditions as set forth in the Program Agreement document and the ITI Preguntas Student Booklet. I accept and will be bound by all such terms and conditions on my behalf and on behalf of the applicant.**

Signature of Legal Parent or Legal Guardian: _____ Date: _____

Costa Rica Trip Student and Guardian Acknowledgement Form

- ☐ Student and guardians have read the entire ¿Preguntas? Packet and the entire Preparation, Enrollment and Policies Packet.

- ☐ Student and guardians have read the entire TRIP EXPECTATIONS AND RULES: Costa Rica 2027 document (on pages 7-9 below.) Student and guardians understand the highlighted portions about expulsion from the trip while abroad and the student being returned unaccompanied to Shorewood at the family's expense.

- ☐ Student and guardians understand that any discipline or behavior-related issues a student has may disqualify the student from traveling at any point before departing for Costa Rica. Students and guardians understand that, among the consequences of these discipline or behavior-related issues, families will completely forfeit their trip payments as outlined by Interact Travel.

- ☐ Student and guardians agree that, if a student is receiving any sum of financial aid from Shorewood Intermediate School's Costa Rica Financial Need Fund and later cancels or is disqualified, the student's family is responsible for refunding 100% of any funds received back into the fund.

- ☐ All students are required to attend at least 5 of 7 of the flex time pre-departure meetings. All students and a guardian or adult family representative/designee are required to attend all 3 of the family pre-departure meetings.

- ☐ Student and guardians understand that health-related travel protocols may apply and are subject to change by Interact Travel, Shorewood Schools, Costa Rican health authorities and/or the CDC. Insurance must be purchased independent of Interact, and is not included.

Student Signature: _____ Date:_____

Guardian Signature: _____ Date:_____

Shorewood
SCHOOL DISTRICT

SHOREWOOD HIGH SCHOOL
1701 E Capitol Drive
Shorewood, WI 53211
(414) 963-6921

TEACHER REQUEST FOR OVERNIGHT FIELD TRIP

Before submitting this form to your building principal, please review policy, guidelines and exhibits. Submit this form and supporting documentation to your School Principal for approval.

Name of District employee in charge: **Kyle Amati and Jason Clark**

Destination: **Italy (Rome, Lucca)**

Date and time of departure: **March 20, 2027**

Date and time of return: **March 29, 2027**

Name of class or co-curricular activity/student group: **SHS Band/SHS Choir**

Number of Students attending the trip: **56**

Will students miss any instructional days/hours of school for this trip? ☑ YES ☐ NO

If yes, please explain:

Students will miss the Monday after the trip due to travel day back from Italy to Milwaukee.

Description of the educational expectations/correlation to the classroom curriculum:

Students will be performing music at a concert in Italy as well as participate in a music clinic with university students/teachers in Italy. Students will also see a live concert during this trip.

Describe your discipline plan:

See Trip Rules and Agreements.

If your trip overlaps with a major religious holiday, how will you accommodate your student(s) who desire to observe the holiday?

The trip overlaps with major Christian Holiday of Holy Week/Easter. Students will have the opportunity to participate with Easter serves while on this trip.

What is your plan for health and safety emergencies?

We will follow all district protocols regarding health and safety, including collection of medical information, including that related to allergies. We hope to have a physician (a parent chaperone) on the trip to help with emergency protocols including administration of medication or medical help if needed.

Number of chaperones: **Will follow the district guidelines for number of chaperones per student.**

Estimated cost per chaperone: **$ 4300**

Estimated cost per student before and after fundraising:

Before **$4300** After $ Depends on how much student fundraises

Description of fundraising proposal for the trip:

Students have several opportunities to fundraise over the year from coffee, popcorn, fruit, and olive oil sales. More fundraisers might be added to help with the ramped up costs.

Arrangements/provisions made for students in need of financial assistance:

_____

_____

Is this an optional student travel experience? ☑ YES ☐ NO

I have complied with all the requirements listed above.

Signature of District employee: _____ Date: 6/5/26

Signature of District employee: _____ Date: 6/5/26

The overnight trip proposal and accompanying documentation has been reviewed and approved.

Signature of Principal: _____ Date: _____

The overnight trip proposal and accompanying documentation has been reviewed and approved.

Signature of Superintendent: _____ Date: _____

The overnight trip proposal and accompanying documentation has been reviewed and approved by the School Board.

Signature of School Board President: _____ Date: _____

REVIEWED: August 14, 2012

SHOREWOOD HIGH SCHOOL BAND/CHOIR
ITALY 2027

TRIP RULES AND AGREEMENTS

1. There will be no smoking or vaping at any time during this trip. Violation of this rule will result in an immediate trip home at the parent's expense.

2. There will be no drinking of alcoholic beverages or use of illegal drugs (including marijuana) at any time. Violation of this rule will result in an immediate trip home at the parent's expense.

3. Possession of a weapon, use of a weapon, or endangering the safety of anyone is strictly prohibited. Violation of this rule will result in an immediate trip home at the parent's expense.

4. All students are required to follow all school rules and policies and those rules listed in the "Behavior Expectations" document during the course of the trip.

5. Courtesy will be shown at all times to chaperones, guides, and directors.

6. Any conduct detrimental to other students will be subject to discipline.

7. During the trip, student's personal appearance and dress will reflect neatness and cleanliness at all times. You are representing not only the band but also the school and community of Shorewood.

8. All students will stay with their assigned group at all times.

9. No one will leave their hotel room after bed check/lights out. Bed check means in your room, in bed with the lights out for the night.

10. Hotel rooms and luggage may be checked frequently. Luggage may be checked before leaving - any forbidden items will cancel the trip for that student. I/we also agree to allow the student's luggage and carry on to be searched before leaving for the trip. If forbidden items are found, I/we acknowledge that the student will not be permitted to go on the trip.

11. Any damage caused by an individual(s) (vandalism, breakage, stealing) will constitute a violation and be subject to an immediate trip home at the parent's expense. Also, any fee or fines assessed as a result of the violation will be assessed to the individual(s) responsible.

12. Replacement or repair of uniforms and equipment furnished by the band or school if lost or damaged through willful neglect will be the financial responsibility of the individual responsible.

13. The school does not carry any type of accident insurance coverage for students, therefore it is suggested that parents consider purchasing some type of travel insurance for your child. This is left up to the discretion of the parents. If you choose to not purchase travel insurance, you must sign a waiver.

14. Age of student(s) as of March 20, 2027 _____.

15. Chaperones will use all due precaution within reason. However, I/we acknowledge the possibility of accidents occurring (i.e., cuts, fractures, illness, etc.) and do not hold school personnel or chaperones liable.

I have read and understand the rules and agreements and agree to adhere to the same.

_____	_____	_____
Print name of student	Student's signature	Date

We have read and understand the rules and agreements and understand that we and our child(ren) are to adhere to them.

_____	_____
Guardian's signature	Date
_____	_____
Guardian's signature	Date

Shorewood
SCHOOL DISTRICT

SHOREWOOD HIGH SCHOOL
1701 E Capitol Drive
Shorewood, WI 53211
(414) 963-6921

TEACHER REQUEST FOR OVERNIGHT FIELD TRIP

Before submitting this form to your building principal, please review policy, guidelines and exhibits. Submit this form and supporting documentation to your School Principal for approval.

Name of District employee in charge: **Kyle Amati and Jason Clark**

Destination: **Italy (Rome, Lucca)**

Date and time of departure: **March 20, 2027**

Date and time of return: **March 29, 2027**

Name of class or co-curricular activity/student group: **SHS Band/SHS Choir**

Number of Students attending the trip: **56**

Will students miss any instructional days/hours of school for this trip? ❑ YES ❑ NO

If yes, please explain:

Students will miss the Monday after the trip due to travel day back from Italy to Milwaukee.

Description of the educational expectations/correlation to the classroom curriculum:

Students will be performing music at a concert in Italy as well as participate in a music clinic with university students/teachers in Italy. Students will also see a live concert during this trip.

Describe your discipline plan:

See Trip Rules and Agreements.

If your trip overlaps with a major religious holiday, how will you accommodate your student(s) who desire to observe the holiday?

The trip overlaps with major Christian Holiday of Holy Week/Easter. Students will have the opportunity to participate with Easter serves while on this trip.

What is your plan for health and safety emergencies?

We will follow all district protocols regarding health and safety, including collection of medical information, including that related to allergies. We hope to have a physician (a parent chaperone) on the trip to help with emergency protocols including administration of medication or medical help if needed. If a physician chaperone cannot be found, a staff member will take required training.

Number of chaperones: **Will follow the district guidelines for number of chaperones per student.**

Estimated cost per chaperone: **$ 4300**

Estimated cost per student before and after fundraising:

Before **$4300** After $ Depends on how much student fundraises

Description of fundraising proposal for the trip:

Students have several opportunities to fundraise over the year from coffee, popcorn, fruit, and olive oil sales. More fundraisers might be added to help with the ramped up costs.

Arrangements/provisions made for students in need of financial assistance:

_____

_____

Is this an optional student travel experience? ❑ YES ❑ NO

I have complied with all the requirements listed above.

Signature of District employee:_____ Date: _____

Signature of District employee:_____ Date: _____

The overnight trip proposal and accompanying documentation has been reviewed and approved.

Signature of Principal:_____ Date: _____

The overnight trip proposal and accompanying documentation has been reviewed and approved.

Signature of Superintendent:_____ Date: _____

The overnight trip proposal and accompanying documentation has been reviewed and approved by the School Board.

Signature of School Board President:_____ Date: _____

REVIEWED: August 14, 2012

Dear Band and Choir Students and Families,

We are thrilled to share the destination for the 2027 Shorewood High School Band/Choir Tour — **Italy!**

Our journey will begin in Rome, where students will explore some of the world's most iconic landmarks, including the Colosseum, Roman Forum, Pantheon, and St. Peter's Basilica, along with other important sites in Vatican City. While in Rome, we will also participate in a clinic and concert experience hosted by a local conservatory of music.

From there, we will travel north to visit the beautiful towns of Spoleto, Assisi, Lucca, and Pisa, and take a day trip to Florence to experience its remarkable architecture and masterpieces — including Michelangelo's *David*. Our tour will conclude with a final performance in Lucca. Throughout the trip, students will enjoy a meaningful blend of performance opportunities and unforgettable cultural experiences. Please see the attached itinerary for additional details.

The tour will take place over spring break, from **Saturday, March 20 through Monday, March 29, 2027**. The estimated cost is **$4,300-$4,800**, which includes round-trip airfare, instrument baggage fees, ground transportation, all performances and clinics, entrance fees to scheduled sites, hotel accommodations, and two meals per day (breakfast and dinner). Final pricing may vary slightly based on the number of participants, exchange rates, airfare costs, and fuel surcharges. Need-based scholarships can be requested via the front office.

A **$500 deposit will be due on April 10, 2026**, and a detailed payment schedule is included in this packet. The Shorewood Band Parent Association and Shorewood Choir Boosters will offer multiple fundraising opportunities next fall and winter. As always, all fundraising proceeds will be credited directly to your child's booster travel account. In addition, the boosters will sponsor an in-school educational series to help prepare students for travel to Europe. Students and parents are encouraged to participate in these sessions.

We plan to have approximately one chaperone for every 4–5 students to ensure a safe and supportive experience. Parents are warmly welcomed and encouraged to join us on the tour! All chaperones will go through a background check via the school's Raptor program.

It is our sincere hope that every Shorewood High School Band and Choir student will be able to participate in this extraordinary opportunity. Travel and performance experiences like this are truly transformative; musically, culturally, and personally.

Please don't hesitate to reach out with any questions. We look forward to sharing this incredible adventure together!

Kyle Amati
Shorewood High School Band
kamati@shorewood.k12.wi.us

Jason Clark
Shorewood High School Choir
jclark@shorewood.k12.wi.us

Shorewood High School Band/Choir
Italy 2027
PRELIMINARY ITINERARY

Saturday, March 20
Coach buses depart SHS for O'Hare International Airport
Overnight flight to Europe

Sunday, March 21
Morning arrival at Rome Airport and transfer into the city. First orientation walk/tour of Rome. Welcome diner in Rome.

Monday, March 22
Breakfast at hotel
Morning focused on Ancient Rome: Colosseo, Roman Forum, Pantheon
Afternoon small group time before gathering for dinner

Tuesday, March 23
Breakfast at hotel
Tour of St. Peter's Basilica and/or Vatican Museum.
Rehearsal and Clinic with Conservatory followed by Concert – Diner before or after concert

Wednesday, March 24
Breakfast at hotel
Depart for Spoleto
Arrive around lunch - Orientation walk with tour guide - Free time in Spoleto
Dinner

Thursday, March 25
Breakfast at hotel
Full-day excursion to Assis and the Umbria countryside - Visit St. Francis' Basilica and the Medieval town of Assisi
Afternoon culinary workshop and barbeque dinner.
Return to Spoleto

Friday, March 26
Breakfast at hotel
Depart for Lucca
Stop in Florence for walking tour including visit to Accademia (art museum)
Dinner in Lucca

Saturday, March 27
Breakfast at hotel
Visit Pisa, "Campo dei Miracoli" - Cathedral, Baptisterium, and Leaning Tower.
Return to Lucca for rehearsal.
Dinner

Sunday, March 28
Breakfast at hotel
Morning free to enjoy Easter Celebrations in Lucca
Afternoon dedicated to music activities in preparation for concert.
Farewell dinner

Monday, March 29
Early morning breakfast

Transfer to Bologna International Airport for return flight to Chicago.

SHOREWOOD HIGH SCHOOL BAND/CHOIR
ITALY 2027

Cost per student/Chaperone: $4300 - $4800

Included in cost:
Airfare
All transportation, including to and from airports
8 nights in superior tourist class hotels
8 breakfasts and dinners
Professional tour managers for the duration trip
Local city guides
Entrance fees to all sightseeing
Two Concerts (Rome and Lucca)
Instrument transportation
Percussion and other large instrument rentals

Payment schedule:
$500 deposit due April 10, 2026
$500 due June 5, 2026
$TBD due September 15, 2026
$TBD due October 15, 2026
$TBD due November 15, 2026
$TBD due December 15, 2026
Balance due February 15, 2027

Payments will be made to Infinite Campus, check or credit card

Important Dates/Things to Do

Submit deposit and registration form	April 10, 2026
Apply for or renew passport	Summer 2026
International trip permission Form	December 2026

Fundraiser Opportunities

Coffee	Fall 2026
Fruit and Popcorn	Winter 2026
Coffee and Olive Oil	Winter 2027

CANCELLATION POLICY

Cancellation Fees will be assessed based on the date the notice of a Participant's cancellation is received by Conceptio as follows:

USD 5.000.- (flat fee – non refundable)	After signature of contract
Free of charge (except for flat fee)	Prior to Nov. 23rd (90 days)
50% of booking value	Nov.24rd to Jan.19th (45 days)
75% of booking value	Jan. 20th to March 5th (15 days)
100% of booking value	After March 5th (no show)

Shorewood High School Band/Choir
Italy
Performance Tour
March 20-March 29, 2027

Student Registration

Student Name(s) _____

_____

Parent email _____

Parent Signature _____

Date _____

Number of deposits to IC _____ @ $500.00 each

I am interested in serving as a chaperone for this trip _____

Name(s) of interested chaperones _____

_____

Notes about Chaperone _____

Chaperones deposits will be collected after the April 10 deadline when the number of student participants is determined.

To secure a spot for your child on this tour, please return this form no later than **April 10, 2026** to either:

Kyle Amati
Shorewood High School Band
1701 East Capitol Drive
Shorewood, WI 53211

or

Jason Clark
Shorewood Choirs
1701 East Capitol Drive
Shorewood, WI 53211

Overnight Field Trip — Budget & Payment Schedule Template

Shorewood School District | Complete and submit to the Business Office for review (Step 4 of the Approval Procedure)

TRIP INFORMATION	
Trip Name / Destination:	**SHS Band and Choir Trip to Italy**
Lead Teacher / Sponsor:	**Kyle Amati and Jason Clark**
Number of Chaperones (covered):	**4 (via conceptio program)**
Total Participants (students):	**56**

COST BREAKDOWN

Cost Category	Total Cost	Cost per Student	Cost per Chaperone ()	Funding Source	Notes
Transportation (airfare/charter)	$97,836.20	$1,482.37	Parent Chaperones pay same as students.	Families or Fundraising	This is up in the air based on what the quotes are after aporval. This comes from quote of approximately for 70 people.
Added airfare expenses	~100.00	TBD	Parent Chaperones pay same as students.	Families, Fundrasing, or community donation, split up amongs all participants.	For studnets who need extra checked bag for instrument
Land Package		$2,730.00	Parent Chaperones pay same as students.	Families or Fundraising	All Lodging, meals, admissions, and gratiuties are all included in the land pacakge amount. This includes 4 comps.
Busing to and from airport	s quote 40 person l	$40.00	Parent Chaperones pay same as students.	Families, Fundrasing, or community donation.	
Instrument Rentals	TBD	TBD	TBD	Families, Fundrasing, or community donation.	Unknown until other steps are decided.
Travel Insurance	As Requested				Up to the discretion of each family
Gratuities / Misc.					Included in other areas.
TOTAL TRIP COST	**$97,836.20**	**$4,252.37**	**-**		

COST PER PARTICIPANT	
Cost per Student (before fundraising)	**$4,252.37**
Less: Fundraising / Subsidy per Student	
Net Cost per Student (after fundraising)	**$4,252.37**

PAYMENT SCHEDULE (Vendor Due Dates & Participant Collection Deadlines)

Overnight Field Trip — Budget & Payment Schedule Template

Shorewood School District | Complete and submit to the Business Office for review (Step 4 of the Approval Procedure)

Per the Overnight Field Trip Approval Procedure (Step 5): each participant collection deadline must fall at least 7 calendar days before the corresponding vendor due date so funds are in hand before any payment becomes non-refundable. This table supports up to 8 installments — leave any unused rows blank, or relabel rows to match your vendor's actual payment plan (e.g., 7 deposits + 1 final payment).

Installment and Vendor Due Dates	Due Date	$ Amount	Running Balance
Deposit #1		$ 500.00	
Deposit #2		$ 800.00	$1,300.00
Airfare Deposit			$1,300.00
Deposit #4		$ 800.00	$2,100.00
Travel Agent Deposit			$2,100.00
Deposit #6		$ 800.00	$2,900.00
Deposit #7		$ 800.00	$3,700.00
Final Payment		$ 600.00	$4,300.00
TOTAL		**$4,300.00**	

All TBD based on final quotes

Check: installments should total 100% of trip cost

Shorewood School District | Submit completed template with Trip Plan to the Business Office (Overnight Field Trip Approval Procedure, Step 4)