



DOMINICAN REPUBLIC MISSION TEAM

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Parental Form for 2026 DR Mission Team:

Trips running from June 26 to July 18, 2026

Date: _____

Parent/Guardian Permission for minors under 18 for the 2026 DR Mission Team to La Romana, Dominican Republic.

We, _____ and _____,
of (Both Parents or Legal Guardians if applicable)

_____,
(Address)

are the parent(s) or legal guardian(s) of

_____,
(Youth's Name)

give permission for him/her to travel to the Dominican Republic from _____ (dates)
with the DR Mission Team and the team leaders.

We understand that the trip is sponsored by the DR Mission Team. In the event of medical emergency, I hereby authorize those in charge to take my child to the nearest licensed physician, medical center or hospital, and to secure necessary emergency treatment. I waive any right to assert any claim against the DR Mission Team or its agents in respect to injury or illness related to this trip.

Parent/Guardian Signatures: _____

(Note: In the case of two parent families/legal guardians, BOTH parents/legal guardians must sign this form. In the case of single parent families, the sole parent/legal guardian may sign. This form is required by the airline, and each teen's permission form will be taken on the trip.)

PLEASE NOTE: NO INSURANCE IS PROVIDED BY THE DR MISSION TEAM. If you do not have insurance and want to be covered, you may secure a short-term policy from your local insurance agent.