



1422 West Lake Street
Minneapolis, MN 55408
tel: 612.823.7217
fax: 612.823.9064

12, Rue Sainte Anne
75001 Paris, France

www.VistasInEducation.com

ALCOHOLIC BEVERAGE PERMISSION

Student's name: _____

ALCOHOLIC BEVERAGE PERMISSION

Realizing that the sampling of wine is regarded by many as an educational aspect of a French travel experience, I grant my daughter or son permission to partake in the limited use of this alcoholic beverage in accordance with the following restrictions:

- 1) The privilege is granted only upon parental consent (this form).
- 2) The experience is limited to wine.
- 3) The use of wine shall be only in the presence of and under the direction of the chaperon.
- 4) The chaperon reserves the right to withdraw the privilege should it be abused.

Parent or Guardian Signature: _____

Date: _____