

# Program Release



I, \_\_\_\_\_, release the AIFS Foundation/AYA and its representatives from any and all responsibilities  
*Natural Parent Name (printed)*  
of the program as of the day my son/daughter leaves his/her Host Family, \_\_\_\_\_.  
*Effective date (printed)*

I am aware and accept that the aforementioned organizations and their representatives are no longer responsible for my son/daughter and that his/her participation in the Academic Year in America program is completed.

Therefore, I, \_\_\_\_\_, voluntarily withdraw my son/daughter from the AYA program on my own free  
*Natural Parent Name (printed)*  
will and under my own authority.

Signed: \_\_\_\_\_  
*Natural Parent Signature*

Witnessed: \_\_\_\_\_

Date: \_\_\_\_\_

**Please Note:** The AYA student should also sign a voluntary withdrawal form before leaving his/her host family.