



SOUTHLAKE SISTER CITIES YOUTH AMBASSADOR TRIP TO TOME, MIYAGI, JAPAN

APPLICATION DEADLINE - FRIDAY FEBRUARY 27, 2026

TRIP: SUNDAY, MAY 24, 2026 – TUESDAY, JUNE 2, 2026



ABOUT THE PROGRAM:

Serving as a Southlake Sister Cities Youth Ambassador provides the opportunity for global friendship and a life-changing experience while fulfilling and underscoring the mission of the Sister Cities International program of “bringing the world together through education and cultural exchange.”

The Southlake Sister Cities Youth Ambassador Program offers the youth of Southlake an opportunity to represent the City as a Youth Ambassador to Southlake’s Sister City - Tome, Japan. The Youth Ambassadors and adult chaperone are immersed in a cultural experience while living with host families and experiencing a variety of activities planned by the city and their hosts.

GENERAL INFORMATION:

- Youth Ambassadors stay with host families individually. The opportunity to experience the Japanese culture firsthand by living with a Japanese family is a chance of a lifetime.
- The minimum number of Youth Ambassadors each year is **4** and the maximum number is **10**. **If less than 4 Youth Ambassadors are accepted, the trip may be canceled.**
- Cost: The estimated cost of this homestay trip, excluding airfare and personal expenses, is approximately eight hundred fifty dollars (\$850.00) which includes travel insurance, Japan Rail Pass, Tokyo hotel accommodation and tours. Airline tickets will be purchased as a group to ensure all students and chaperones are on the same flights. The estimated travel cost may increase or decrease and will be adjusted accordingly by the time of booking.
- Southlake Sister Cities will review completed applications received by the deadline and at their sole discretion to select Youth Ambassadors. *Acceptance notices will be given on-going thru March 1, 2026.*
- Students are encouraged to participate in activities while Tome youth visit Southlake and/or host a student from Japan in their home during their visit.

GENERAL REQUIREMENTS TO BE A YOUTH AMBASSADOR:

- Be a member of Southlake Sister Cities.
- Southlake resident or Southlake Carroll student between **9th and 12th grades**
- Must attend mandatory orientation classes prior to the trip.
- A recommendation from a Teacher/Counselor and Principal approval is required.
- Provide an one-page essay on why you want to visit Tome, Japan
- Provide a copy of your current passport identification page.
- Be current on vaccinations

ABOUT TOME, JAPAN:

Southlake Sister Cities originally signed a friendship city agreement with the Town of Toyoma, Japan in September 1991. The relationship was later amended to a sister city agreement in September 2004. On April 1, 2005 the Town of Toyoma dissolved and merged with nine other towns in the former Tome District into one larger city called Tome City. On July 5, 2006, Mayor of Tome City led a twenty-member delegation to Southlake to attend the celebration of the City of Southlake’s 50th Anniversary. On that day, a Sister Cities Agreement was signed by both the Mayor of Southlake and the Mayor of Tome.

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Tome is located in the northeast part of Miyagi Prefecture with a population of approximately 76,000 residents. The Kitakami River, the fifth longest river in Japan, flows through the town and was used as the primary route for commerce. The area is widely known as one of the best places for rice and forestry. Tome City has many historical buildings including the Samurai Museum, the Police Museum, the Prefectural Office and the Education Museum, which was a historic elementary school, built in 1888.



ABOUT SOUTHLAKE SISTER CITIES:



Southlake Sister Cities, founded April 11, 1991, is a non-profit organization dedicated to fostering global understanding, friendship and communication through exchanges with Southlake's Sister Cities. Southlake Sister Cities offers an exciting venue for local people to expand their cultural, civic and economic horizons. Southlake Sister Cities is composed of people of all ages, many of them civic and business leaders in the community. Through Southlake Sister Cities, people can cultivate friendships with citizens of other countries and build a bridge of global understanding and trust.
www.SouthlakeSisterCities.org

ABOUT SISTER CITIES INTERNATIONAL

Southlake Sister Cities is a proud member of Sister Cities International. Sister Cities International traces its origin to shortly after World War II, when sister city, county and state affiliations proliferated between the U.S. and similar jurisdictions around the world. A national Sister City movement emerged when U.S. President Dwight D. Eisenhower convened a White House conference on citizen diplomacy in 1956. Originally part of the National League of Cities, Sister Cities International became a separate nonprofit organization in 1967. For more information about Sister Cities International, visit their website at www.sister-cities.org.

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Part 1: GENERAL INFORMATION

Legal name (as shown on passport): _____ Passport expiration date: _____

Address: _____ Member of SSC since: _____

City: _____ State: _____ Zip: _____

Home telephone: _____ Cell phone: _____

Email: _____ Date of birth: _____ Gender: _____

School: _____ Age _____ Grade: _____

Mother's name: _____ Work number: _____

Email: _____ Cell number: _____

Father's name: _____ Work number: _____

Email: _____ Cell number: _____

Names & ages of brothers & sisters: _____

Please list interests, school activities/involvement (information will be provided to host family who would like to know a little about you):

Is student taking any medications? Yes No If yes, please attach a list.

Does student have any allergies? Yes No If yes, please attach a list.

Are you a member of Southlake Sister Cities? Yes No

Are you a Southlake resident? Yes No

Has student been to Japan with the Sister Cities program before? Yes No

Has your family served as a host family to an international student? Yes No

Is your family interested in hosting a Tome student in your home? Yes No

Part 2: ACADEMIC RECOMMENDATION

Teacher/Counselor Reference: Please have a current Teacher or Counselor attach a signed and dated recommendation of your ability to represent the City of Southlake and Southlake Sister Cities as a Southlake Sister Cities Youth Ambassador. An academic standing should be included in this recommendation. Please list a contact number or email for Teacher/Counselor.

Teacher or Counselor (please print): _____ Subject & grade: _____

School: _____ Email or telephone: _____

Principal: Please have Principal sign below indicating they understand you are applying to Southlake Sister Cities as a Youth Ambassador and are recommending you to represent Southlake as a Youth Ambassador.

Name: _____ Email or telephone: _____

Signature: _____ Date: _____

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Part 3: STUDENT ACCEPTANCE

I understand that I am representing Southlake Sister Cities and the City of Southlake as well as the United States of America. I realize my behavior reflects upon these groups and will do my best to behave in a manner that will make my parents, my school and my City proud.

I will follow all rules of conduct set forth by Southlake Sister Cities.

I agree to attend all orientations in preparation for the trip.

I have attached a short essay of why I want to visit **Tome, Japan** as part of the REQUIRED documents necessary for consideration of my application.

I agree to respect and mind the chaperones, my host family and the people of Tome who organize this trip.

I understand a short report summarizing my experience on the trip is due within two weeks after my return.

I understand that any misconduct on my part will cause immediate notification of my parent/guardian at their expense. I will comply with any disciplinary action agreed upon by parent/guardian and chaperone.

I have attached all necessary documents and have read and understand this application and my commitment as a Youth Ambassador.

Youth Ambassador Signature _____ Date: _____

Part 4: PARENT PERMISSION

RECOMMENDATION

I understand my child will be traveling under the guidance of a chaperone(s) designated by Southlake Sister Cities. I am confident my child will conduct themselves in a respectful manner and that I/we will be contacted immediately, at my/our expense, of any misconduct that is unbecoming of a Youth Ambassador and will abide by any actions necessary to amend the issue.

PERMISSION AND RELEASE OF CLAIMS

I, _____, legal parent or guardian of _____, give my permission for him/her to go to **Tome, Miyagi, Japan May 24th – June 2nd, 2026**, and to participate in all activities. I hereby release Southlake Sister Cities and the City of Southlake, its staff and volunteers of any liability in the event of accident or injury.

IN CONSIDERATION OF THE PERMISSION GRANTED TO MY CHILD TO TRAVEL TO TOME WITH SOUTHLAKE SISTER CITIES AND OTHER GOOD AND VALUABLE CONSIDERATION, I ASSUME ALL RISK AND AGREE TO HOLD HARMLESS AND RELEASE SOUTHLAKE SISTER CITIES AND THE CITY OF SOUTHLAKE, AND THEIR STAFF, VOLUNTEERS, OFFICERS AND EMPLOYEES FROM ANY AND ALL CLAIMS OR SUITS FOR PROPERTY DAMAGE OR LOSS, PERSONAL INJURY, INCLUDING DEATH, SUSTAINED BY MY CHILD IN CONNECTION WITH THE TRIP TO TOME, WHETHER OR NOT SUCH DAMAGES OR INJURIES ARE CAUSED DIRECTLY OR INDIRECTLY BY THE NEGLIGENCE OF THE STAFF, VOLUNTEERS, OFFICERS OR EMPLOYEES OF SOUTHLAKE SISTER CITIES AND THE CITY OF SOUTHLAKE. I FURTHERMORE ASSUME ALL RESPONSIBILITY AND AGREE TO INDEMNIFY, HOLD HARMLESS AND DEFEND SOUTHLAKE SISTER CITIES AND THE CITY OF SOUTHLAKE, AND THEIR STAFF, VOLUNTEERS, OFFICERS AND EMPLOYEES FROM ANY AND ALL CLAIMS OR SUITS, FOR PROPERTY LOSS OR DAMAGE AND/OR PERSONAL INJURY, INCLUDING DEATH, SUSTAINED BY OTHERS BY REASON OF THE CONDUCT OF MY CHILD.

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Affidavit of Personal Consent for Travel outside the United States and Emergency Medical Treatment

This form will be provided to you at the first Youth Ambassador meeting.

MEDICAL DISCLOSURE

A list of all medication that is taken by applicant is attached as well as any medical issue that has a possibility of occurring (such as migraine headaches, stomach upsets, panic attacks, etc.) and authorized medications as applies.

Parent signature: _____ Date: _____

Attachment checklist: Complete Application List of allergies (if applicable)
 Essay List of medications (if applicable)
 Teacher/Counselor Recommendation Copy of passport
 Liability Waiver (once accepted)

Please email application along with required attachments to:

Southlake Sister Cities

TomeTrip2026@SouthlakeSisterCities.org