

## LETTER OF CONSENT FOR TRAVEL OF A MINOR CHILD

To Whom It May Conce	rn:						
I/We,							
am/are the lawful custo					ot(s)/Legal Guardian(s)) s) or legal guard		f the following minor
Child's full name							
Date of Birth			Place of Birth				
Passport Number		Passport Expiry Date					
Child's full name							
Date of Birth		Place of Birth					
Passport Number	Passport Expiry Date						
These minors have my/o	our consent	to trave	l with:				
Name of accompanying	g person						
Passport Number		Passport Expiry Date					
Destination							
From (date)			To (date)				
Should there be any que  Name of non-accompa  Street address and apa	anying guar		he following (	contact	details:		
City	arement #		Stat	e		Zip	
Cell Phone			Ema				
Signature:(Signature of	f Custodial Parer	nt, and/or No	on-Custodial Parent	or Legal Gu	Dan	te:	
Signature:(Signature o	nt, and/or No	Non-Custodial Parent or Legal Guardian)  Date:					
Full Name:							
Signed before me,		(Full Name	e of Witness)		,		
This(Date)	at _		(Name of Location				
Signature:							