

MINOR (CHILD) TRAVEL CONSENT

I/We, _____, am/are the lawful custodial parent(s) and/or non-custodial parent(s) or legal guardian(s) of:

Full Name:

Date of Birth:

Place of Birth:

Passport Number (if applicable):

- Country of Issuance:
- Date Issuance:
- Date of Expiration:

Traveling alone/accompanying person.

- I authorize my child to travel alone.
- I authorize my child to travel with the following individual/organization:

- Individual/Organization Name:
- Relationship to Child (if applicable):
- U.S. or Foreign Passport Number (if applicable):
 - Country of Issuance:
 - Date Issuance:
 - Date of Expiration:

I authorize my child to travel to the following location _____ during the period beginning on _____ and ending on _____.

Parent / Legal Guardian Signature

Date:

Tel:

DL#:

Parent / Legal Guardian Signature

Date:

Tel:

DL#:

Public Notary

Expiration date

Signed in front of me on _____