MINOR (CHILD) TRAVEL CONSENT

I. The Parent(s)	
I/We,	, am/are the lawful custodial parent(s) and/or non-custodial
parent(s) or legal guardian(s) of:	
II. The Minor	
Full Name:	
Date of Birth:	
Place of Birth:	
Passport Number (if applicable):	
	;
□ - I authorize my child to travel al	one.
	ith the following individual/organization:
	ne:
	licable):
	umber (if applicable):
	;
o Date Expiration:	
IV. Itinerary	
l authorize my child to travel to the	following location during the
	, 20 and ending on
. 20	



V. Signature(s)

Parent / Legal Guardian Signature:	
Date:	
Full Name:	
Parent / Legal Guardian Signature: _	
Date:	
Full Name:	