PERMISSION TO TRAVEL WITH MINOR CHILD

I/We,		
(Full Name(s) of Custodial and/or Non-Custodial Pa legal guardian(s) of:	rent(s)/Legal Guardian(s)) am/are the la	awful custodial parent and/or non-custodial parent(s) of
legal guarulari(s) of.		
Child's full name:		
Date of Birth:		
Place of Birth:		
	ving noreon:	_, _(Child's Full Name) has my/our consent to travel with:
Relationshin ·	ying person	to
visit		during the period of
(Name of Foreign Country) (Dates of Travel: Depart	ture and Return)	
During that period,		will be residing with/traveling with
the fellowing eddroed/d	antination.	(Name of Person Who Child will be /Residing With in Foreign Country) at
the following address/de	esunation:	
Address and apartment	number:	
City, State/Province, Co	ountry:	
Telephone and fax num	bers (work, cell phone ar	nd residence)
Signatura(a):		(Signature of Custodial Parent, and/or Non-Custodial Parent or Legal Guardian)
Date:		(Signature of Custodial Parent, and/or Non-Custodial Parent or Legal Guardian)
Signature:		(Signature of Custodial Parent, and/or Non-Custodial Parent or Legal Guardian)
Date:		
Print Full Name:		
STATE OF	COUNTY OF	
On	, before me,	, personally appeared,
	, wh	, personally appeared, o personally proved to me on the basis of satisfactory
evidence to be the per	rson(s) whose name(s) is/aı	re inscribed within instrument and acknowledged to me
		ed capacity(ies), and that by his/her signature(s) on the
instrument the person	(s) or the entity upon behalf	of which the person(s) acted, executed the instrument.

Witness my hand and official seal

(notary signature)

