**Minor Travel Consent Form**

To Whom It May Concern:

I/We,
(Full Name(s) of Custodial and/or Non-Custodial Parent(s)/Legal Guardian(s))

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

|  |  |
| --- | --- |
| Child's full name: |                                                                                                      |
| Date of Birth: |                                                                                                      |
| Place of Birth: |                                                                                                      |
| U.S. Passport Number: |                                                                                                      |

                                                                                , has my/our consent to travel with:
(Child's Full Name)

(Full Name of Accompanying Person)

(U.S. or Foreign Passport Number)

Date and Place of Issuance of This Passport)

to visit

((Name of Foreign Country)

during the period of

((Dates of Travel: Departure and Return)

During that period,

((Childs Name)

will be residing with

((Name of Person with Whom the Child will be Residing in Foreign Country)

at the following address:

((Number/street address and apartment number)

((City, State/Province, Country)

((Telephone and fax numbers)

Signature:                             Date:
(Custodial Parent, and/or Non-Custodial Parent or Legal Guardian)

Full Name:

Signature:                             Date:
(Custodial Parent, and/or Non-Custodial Parent or Legal Guardian)

Full Name:

Signed before me,

                                                                                          , (Full Name of Witness)

this                             at                                                                                           .
((Date) and (Location))

Signature of Witness: