

CONSENT FOR INTERNATIONAL TRAVEL

I/We: (Name/s) _____

As: (Relationship) _____

Authorize my/our minor child/children:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

To travel From: _____ **To:** _____ **Date:** _____
(City/State/Country) (City/State/Country) (Date of Travel)

and

To travel From: _____ **To:** _____ **Date:** _____
(City/State/Country) (City/State/Country) (Date of Travel)

Alone _____ (please check if traveling alone), **and Met by** _____

- **OR** -

Accompanied by: (Name of Adult) _____

Relationship: _____

Address: _____

Parent/Legal Guardian Signature: _____

Date: _____

Parent/Legal Guardian Signature: _____

Date: _____

Address: _____

Telephone: _____

SWORN TO and signed before me, a Notary Public,

this _____ **day of** _____, **20** _____

My commission expires on: _____

This Notarized Consent of Travel may be used only once for entry and must be used within 30 days of issuance.