

# Consent Letter for Children Travelling Abroad

To whom it may concern,

I / We, \_\_\_\_\_  
*full name(s) of parent(s) / person(s) / organization giving consent*

Address: \_\_\_\_\_  
*street address, city*

\_\_\_\_\_ *province/state, country*

Telephone and email: \_\_\_\_\_ *telephone* \_\_\_\_\_ *email*

am / are the parent(s), legal guardian(s) or other authorized person(s) or organization with custody rights, access rights or parental authority over the following child:

## Information about travelling child

Name: \_\_\_\_\_  
*child's full name*

Date and place of birth: \_\_\_\_\_  
*dd/mm/yyyy* \_\_\_\_\_ *city, province/territory*

Number and date of issue of passport (if available): \_\_\_\_\_  
*number* \_\_\_\_\_ *dd/mm/yyyy*

Issuing authority of passport (if available): \_\_\_\_\_  
*country where passport was issued*

Birth certificate registration number \_\_\_\_\_  
*number*

Issuing authority of birth certificate \_\_\_\_\_  
*province / territory where birth certificate was issued*

## Information about accompanying person (leave blank if child is travelling alone)

This child has my / our consent to travel alone  **or**

This child has my / our consent to travel with

Name: \_\_\_\_\_  
*full name of accompanying person*

Relationship to child: \_\_\_\_\_  
*mother, father, grandparent, sister, brother, relative, friend, other*

Number and date of issue of passport: \_\_\_\_\_  
*number* \_\_\_\_\_ *dd/mm/yyyy*

Issuing authority of passport: \_\_\_\_\_  
*country where passport was issued*

## Contact information during trip

I / We give our consent for this child to travel to:

Destination(s): \_\_\_\_\_  
*name of destination country / countries*

Travel dates: \_\_\_\_\_  
*date of departure to date of return*

to stay with / at (if applicable) \_\_\_\_\_  
*name of person with whom child will be staying / hotel or other accommodation*

at the following address(es) \_\_\_\_\_  
*street address(es), city (cities)*

\_\_\_\_\_ *province(s)/state(s), country (countries)*

Telephone and email \_\_\_\_\_

*This letter may be signed before a witness who has attained the age of majority (18 or 19, depending on the province or territory of residence) OR certified by an official who has the authority to administer an oath or solemn declaration (recommended).*

## Signature(s) of person(s) giving consent

\_\_\_\_\_

\_\_\_\_\_ *signature(s) of person(s) giving consent*

\_\_\_\_\_ *dd/mm/yyyy*

## Signature of witness

\_\_\_\_\_

\_\_\_\_\_ *signature of witness*

\_\_\_\_\_ *dd/mm/yyyy* \_\_\_\_\_ *city, province/territory*

## or Signature of official

Signed before me on this \_\_\_\_\_

day of \_\_\_\_\_, \_\_\_\_\_,  
*month year*

by \_\_\_\_\_  
*name(s) of person(s) giving consent*

\_\_\_\_\_ *signature of official*

\_\_\_\_\_ *name / title of official*

Questions regarding information in this consent letter should be directed to the person(s) or organization giving consent.

(seal)