

Letter of Parental Agreement

I/We _____ understand that
parent name(s)

my child _____ will be traveling to
child's name

_____ on _____
(destination) *(date of travel)*

Aboard Airline/Flight # _____

With _____
(accompanying adults)

Their expected date of return is _____.

Signed _____
parent signature(s)

Address: _____

Home Phone Number: _____

Cell Phone Number: _____

Emergency Contact: _____

Emergency Contact Number: _____

State of: _____

County of: _____

I certify that I know or have satisfactory evidence that _____

_____ is/are the person(s) who appeared before me and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: _____ Witness my hand and official seal

Signature

Title

My appointment expires: