

To Whom It May Concern:

I/We, _____

am/are the lawful custodial parent 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: _____

Date and Place of Issuance of U.S. Passport: _____

_____, has my/our consent to travel

with: _____

U.S. or foreign passport number: _____

Date and Place of issuance of this passport: _____

to visit _____ during the period of _____.

During that period, _____ will be residing with _____

at the following address: _____

City, State/Province, Country: _____

Telephone and fax numbers (work, cell phone and residence) _____

Signature: _____ Date: _____

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

Full Name: _____

Signature: _____ Date: _____

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

Full Name: _____

State of _____

County of _____

Sworn to before me this ____ day of _____, 200__

By _____

X _____

My commission expires: _____