

Authorization Letter for Travel

Date:

To Whom It May Concern:

I,

Full Name of Parent/Guardian

authorize my child/ward,

Full Name of Child/Ward

Date of Birth:

Passport/ID Number:

to travel to

Destination(s)

from

Departure Date

to

Return Date

Accompanied by (if applicable):

Full Name(s) of Accompanying Adult(s)

Relationship to Child:

Contact Information during Travel:

Signature of Parent/Guardian

Printed Name

Date

Contact Number:
