

## Consent letter for children travelling abroad

To whom it may concern,

I / We,

am / are the lawful

of

\_\_\_\_\_ *full name(s)*

\_\_\_\_\_ *person(s) / organization with:*  
• *custodial rights,*  
• *guardianship rights, or*  
• *parental authority (in Quebec only)*

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

### Information about travelling child

Date and place of birth:

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

\_\_\_\_\_ *location*

Number and date of issue of passport:

\_\_\_\_\_ *number*

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

Issuing authority of passport:

\_\_\_\_\_ *country where passport was issued*

### Information about accompanying person

The aforementioned child has my / our consent to travel with

Name:

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

Date and place of birth:

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

\_\_\_\_\_ *location*

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 the aforementioned child and accompanying person to visit

Location:

\_\_\_\_\_ *name of foreign country*

during the period of

\_\_\_\_\_ *date of departure to date of return*

to reside with

\_\_\_\_\_ *full name of person with whom child will be residing in foreign country*

at the following address:

\_\_\_\_\_ *street address, city*

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

Telephone and fax numbers:

\_\_\_\_\_ *telephone*

\_\_\_\_\_ *fax*

E-mail:

### Information about person(s) giving consent

Any questions regarding this consent letter can be directed to the person(s) or organization giving consent at:

Name(s):

\_\_\_\_\_ *full name(s) of person(s) or organization giving consent*

Address:

\_\_\_\_\_ *street address, city*

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

Telephone and fax numbers:

\_\_\_\_\_ *telephone*

\_\_\_\_\_ *fax*

E-mail:

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

### Signature of witness

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

\_\_\_\_\_ *full name of witness*

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

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

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

\_\_\_\_\_ *location*

### Signature of accompanying person

### Signature of witness

\_\_\_\_\_ *signature of accompanying person*

\_\_\_\_\_ *full name of witness*

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

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

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

\_\_\_\_\_ *location*