

To Whom It May Concern:

FULL NAME AS IT APPEARS
ON THE POSITIVE ID DOCUMENT
SUBMITTED WITH THIS FORM

I (we) _____

FULL ADDRESS AS IT APPEARS
ON THE POSITIVE ID DOCUMENT
SUBMITTED WITH THIS FORM

of _____

HEREBY STATE THAT MY CHILD/CHILDREN:

CHILD'S NAME AS WRITTEN IN PASSPORT	CHILD'S DOB (MM/YY/DD)	CHILD'S PASSPORT NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

is/are traveling to **COUNTRY NAME** _____ for the purpose of a mission trip the dates of

PLANNED DEPARTURE DATE _____ to **PLANNED RETURN DATE** _____ My child/children is/are traveling with

GROUP LEADER OR GUARDIAN'S NAME
AS WRITTEN IN PASSPORT _____ **GROUP LEADER OR GUARDIAN'S PASSPORT NUMBER** _____

My child/children is/are making this journey with my full knowledge and consent. In the event of any questions regarding this consent I may be contacted at:

HOME PHONE _____ **MOBILE PHONE** _____ **WORK PHONE** _____

SIGNATURE OF FATHER OR LEGAL GUARDIAN _____ **PRINTED NAME OF FATHER OR LEGAL GUARDIAN** _____ **DATE** _____

SIGNATURE OF MOTHER OR LEGAL GUARDIAN _____ **PRINTED NAME OF MOTHER OR LEGAL GUARDIAN** _____ **DATE** _____

AFFIX NOTARY HERE:

SAVE & SEND THE FOLLOWING DOCUMENTS

1. **Print** this completed form, have **notarized**, and **return**:
 - ✉ LMNelms@gospelink.org
 - **Gospelink, PO Box 1160, Forest, VA 24551**
2. **Signed and dated** copies of Driver's License (with photograph and address) or copy of Bio page from passport.
3. **Copy of** Child / Children's Birth Certificate
4. **Letter stating** team leader has permission to transport and chaperone your child on this trip.