

# WW Consent Letter for .....

To whom it may concern,

I / We, \_\_\_\_\_  
*full name(s) of parent(s) / person(s) / organization giving consent*

Address: \_\_\_\_\_  
*street address, city*  
\_\_\_\_\_  
*province/state, country*

Telephone and email: \_\_\_\_\_  
*telephone* \_\_\_\_\_ *email*

am / are the parent(s), legal guardian(s) or other authorized person(s) or organization with custody rights, access rights or parental authority over the following child:

## Information about travelling child

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

Date and place of birth: \_\_\_\_\_  
*dd/mm/yyyy* \_\_\_\_\_  
*city, province/territory*

Number and date of issue of passport (if available): \_\_\_\_\_  
*number* \_\_\_\_\_  
*dd/mm/yyyy*

Issuing authority of passport (if available): \_\_\_\_\_  
*country where passport was issued*

Birth certificate registration number \_\_\_\_\_  
*number*

Issuing authority of birth certificate \_\_\_\_\_  
*province / territory where birth certificate was issued*

## Information about accompanying person (leave blank if child is travelling alone)

This child has my / our consent to travel with

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

Relationship to child: \_\_\_\_\_  
*mother, father, grandparent, sister, brother, relative, friend, other*

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 this child to travel to:

Destination(s): \_\_\_\_\_  
*Tivoli Marina Portimão Algarve Hotel, Portimão, Portugal*

Travel dates: \_\_\_\_\_  
*25<sup>th</sup> March to 31<sup>st</sup> March 2018*

to stay with / at (if applicable) \_\_\_\_\_  
*Willow Wheelers Cycling Club*

at the following address(es) \_\_\_\_\_  
*Tivoli Marina Portimão Algarve Hotel, Portimão, Portugal*  
\_\_\_\_\_  
\_\_\_\_\_

Telephone and email \_\_\_\_\_  
*province(s)/state(s), country (countries) +351 282 460 200, htmarinaportimao@tivolihotels.com*

*This letter may be signed before a witness who has attained the age of majority (18 or 19, depending on the province or territory of residence) OR certified by an official who has the authority to administer an oath or solemn declaration (recommended).*

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

\_\_\_\_\_

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

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

## Signature of official

Signed before me on this \_\_\_\_\_

day of \_\_\_\_\_, \_\_\_\_\_,  
*month year*

by \_\_\_\_\_  
*name(s) of person(s) giving consent*

\_\_\_\_\_  
*signature of official*

\_\_\_\_\_  
*name / title of official*

*Questions regarding information in this consent letter should be directed to the person(s) or organization giving consent.*

(seal)