

Parental Authorization

To whom it may concern

I undersigned:

Mr. family name

first name

date of birth

Mrs. family name

first name

date of birth

confirm by the present to be the father / mother / legal guardian of:

family name

first name

date of birth

I / we give the authorization to my / our above-mentioned son / daughter to travel to Germany and/or the Schengen countries without me / us / accompany by

Mr. / Mrs. (family name)

(first name)

(date of birth)

between

and

Place :

Date:

Signature(s)