دافغانستان داسلامي جمهوريت سفارت



سفارت جمهوري اسلامي افغانستان

Embassy of the Islamic Republic of Afghanistan

		Conse	ent Letter for C	hildren Trav	velling Abroad		
To whom it	may concern,	,					
I / We,							
Address:	Full name	e(s) of parents / per	rsons giving conse	giving consent			
	Street add	ress	whet		State	Postcode	
Contact:							
	Telepho		Email				
	parent(s), leg		ther authorised per	rson(s) with cu	stody rights, access rights	s or parental authority ov	
	formation ab	out travelling chil	d(ren)				
Child 1:					D 4D: 1		
Child 2:	Full nan	ne			Date of Birth		
	Full nan	ne			Date of Birth		
Child 3:	- ,,,,						
C1 '1 1 4	Full nan	ne			Date of Birth		
Child 4:	F. 11				D (D) 1		
Child 5:	Full nan	ne			Date of Birth		
	Full nan	ne			Date of Birth	_	
					J		
2. Inf	formation ab	out accompanying	g person (leave bl	ank if child is	stravelling alone)		
This child(r	en) has my / c	our consent to trave	l with us or alone	☐ Go to Next	t Question 3		
This child(r	en) has my / c	our consent to trave	el with \square <i>provide</i>	details below:			
Name:							
Full name of accomplete Relationship to child:		companying perso	n				
Relationship	p to child:	16 4 6 4	1	1 .1 1			
Passport Details:		Mother, father, §	grandparent, siste	r, brother, rel	ative, friend, other		
		Туре	Number			Date of expiry	
3. Sig	gnatures of p	erson(s) giving co	nsent		nature of Justice of the P	eace / Official	
				Signed before	e me on the		
				Day	Month	Year	
			Ву				
Signature(s) of person(s) giving consent			2,	Name(s) of person(s) giving consent			
Date				Ciat-	fofficial		
Duic				Signature oj	т ојјісіа <i>і</i>		
				Name / title	of official		