

Date:

To: Whom it may concern

I, *Your Name Here*, authorize *Child's Name Here (Child's birthdate here)*, and *Child's Name Here (Child's birthdate here)* to travel with *Name Temporary Guardian Here* to *Destination Here*.

They will be departing *Departure Date Here* and returning *Return Date Here*.

During this time, if there is a medical emergency, I also authorize any required medical treatment for *Child(ren) Name Here*

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Signature

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(print name here)

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Street Address

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Town, Province, Postal Code

(\_\_\_\_) \_\_\_\_\_

Daytime phone #

(\_\_\_\_) \_\_\_\_\_

Evening phone #