

PARENT CONSENT FORM

This form must be filled out, signed and notarized for every participant under the age of 18 that is NOT accompanied by BOTH parents or legal guardians.

INSTRUCTIONS

Please fill out, sign and notarize the form and then either mail or fax it to Family to Family Humanitarian Expeditions.

MAIL TO:
Family to Family Humanitarian Expeditions
4219 North Canyon Road
Provo, Utah 84604

FAX TO:
(801) 796-7631

Please contact expedition group leader to determine the name of the individual who will take charge of your child.

Please make at least 1 copy of this document, the original should stay with the participant and mail the copy to the address above.



FAMILY TO FAMILY
 HUMANITARIAN EXPEDITIONS

PARENT CONSENT FORM

TO WHOM IT MAY CONCERN:

For the period of _____ the following child: _____

is in the care of _____ .

As the parent(s) of the above named child I give full authority to the above named person to care for our child. That authority includes their making decisions about travel, accommodations, and medical care as the need arises. I give them this authority for the above named period of time while they are traveling with an expedition to Mexico with Family to Family Humanitarian Expeditions.

 (Signature of parent)

 (Signature of parent)

 (Printed name of parent)

 (Printed name of parent)

STATE OF _____) COUNTY _____)

The foregoing instrument was acknowledged before me, _____, a Notary Public in the County of _____, State of _____.

Witness my signature and official seal this _____ day of _____, 20____.

My commission expires:

 Notary Public