

Dear Parents or Guardians,

Affidavit-Authorization for Minor to Travel

For any minor under the age of 18 traveling with your team out of the United States without Both Parents or Legal Guardians, or traveling with someone other than their Legal Parent(s) or Guardian(s), a notarized affidavit, signed by a Parent(s) or Legal Guardian(s) must be obtained. Someone traveling with the child must be appointed as their temporary guardian while they are traveling out of the United States.

Please complete and sign before a Notary Public the appropriate portion of the form attached. Your child and the appointed temporary guardian must each carry a copy of the Notarized affidavit with them when they travel.

AFFIDAVIT-AUTHORIZATION FOR MINOR TO TRAVEL

Parent or Guardian One:

I, (full name) _____
of the city of _____, state of _____, hereby authorize my minor child (full name) _____, age _____, born on (date) _____, to travel out of the United States to the country of Honduras from (date) _____ to (date) _____, under the custody of (full name) _____. Signed: _____.

Parent or Guardian Two:

I, (full name) _____
of the city of _____, state of _____, hereby authorize my minor child (full name) _____, age _____, born on (date) _____, to travel out of the United States to the country of Honduras from (date) _____ to (date) _____, under the custody of (full name) _____. Signed: _____.

As the lawful parent(s) or guardian(s) of _____, we further authorize the said Custodian(s) to render or cause to be rendered such emergency medical care to the child as may be necessary or desirable for the purpose of the child’s well being on this trip. We further understand that this temporary “delegation” of our parental powers, does not relieve us of the primary responsibility of our child.

IN WITNESS WHEREOF, we have signed this Delegation of Custody, on this the _____ day of _____, 20__.

Signature of guardian or parent (1) Signature of parent or guardian (2)

Sworn to and subscribed before me this the _____ day of _____, 20__.

STATE OF _____)
_____ COUNTY)

My commission expires _____.

NOTARY PUBLIC