

Date: _____

To whom it may concern:

I, _____, the parent of

give permission for my son/daughter to go on vacation with

Mr/Mrs/Ms _____.

They will be traveling to _____

on _____ (cruise ship) or

staying at _____ (resort),

from _____ to _____ (dates).

I also give permission to

Mr/Mrs/Ms _____

To obtain medical treatment as necessary for my child/children.

Signature _____

Print Name _____

Address: _____

Phone #: _____

Notary Stamp and Date