To be completed by the Biological Father / Guardian.

<u>Minors</u>

Date:

[Please be advised that this form must be signed in person with the duly authorized Capago Agent or Commissioner of Oaths as a witness]

Particulars of Minor and Travel Dates	Stamp of Capago agent or Commissioner of Oaths.
Names:	
Surname:	
Date of Birth:	
Country of Birth:	
Passport Number:	
Will be travelling to the Schengen area, from the	
to the, for a	
total of days in the Schengen area.	

## To be completed by the Biological Mother / Guardian.

Names:	Names:
Surname:	Surname:
Date of Birth:	Date of Birth:
Country of Birth:	Country of Birth:
Passport/ID Number:	Passport/ID Number:
Cellphone Number:	Cellphone Number:
Current Residential Address:	Current Residential Address:
I hereby state that I am the biological mother/legal guardian of the aforementioned minor and furthermore, (please mark one of the following with an X)	I hereby state that I am the biological father/legal guardian of the aforementioned minor and furthermore, (please mark one of the following with an X)
I will be travelling with the minor	I will be travelling with the minor
I will not be travelling with the minor but Authorize	I will not be travelling with the minor but Authorize
(Name + Surname)	(Name + Surname)
(Nationality)	(Nationality)
(Passport No)	(Passport No)
(Relationship to Minor)	(Relationship to Minor)
as guardian of my child during their trip.	as guardian of my child during their trip.
(Signature)	(Signature)