

Consent Letter for Students Travelling to
Firwood Camp, 1740 Lake Whatcom Boulevard, Bellingham, WA

To whom it may concern,

I / We,

Address:

Telephone and email:

full name(s) of parent(s) / person(s) giving consent

street address, city

province/state, country

telephone

email

am / are the parent(s), legal guardian(s) or other authorized person(s) or organization with custody rights, access rights or parental authority over the following child:

Information about travelling child

Name:

Date and place of birth:

Number and date of issue of passport (if available):

Issuing authority of passport (if available):

Birth certificate registration number

Issuing authority of birth certificate

child's full name

dd/mm/yyyy

city, province/territory

number

dd/mm/yyyy

country where passport was issued

number

province / territory where birth certificate was issued

Information about accompanying person (leave blank if child is travelling alone)

This child has my / our consent to travel alone ☐ **or**
This child has my / our consent to travel with

Name:

Relationship to child:

Number and date of issue of passport:

Issuing authority of passport:

Ron Friesen

full name of accompanying person

High School Pastor at Northview Community Church

mother, father, grandparent, sister, brother, relative, friend, other

GC489127

10/06/2014

number

dd/mm/yyyy

Canada

country where passport was issued

Contact information during trip

I / We give our consent for this child to travel to:

Destination(s):

Travel dates:

to stay with / at (if applicable)

at the following address(es)

Camp Firwood, 1740 Lake Whatcom Boulevard, Bellingham Washington USA

name of destination country / countries

Friday September 25 - Sunday September 27 2015

date of departure to date of return

Ron Friesen

name of person with whom child will be staying / hotel or other accommodation

1740 Lake Whatcom Boulevard, Bellingham Washington USA

street address(es), city (cities)

province(s)/state(s), country (countries)

604-897-2155

ffriesen@northview.org

This letter may be signed before a witness who has attained the age of majority (18 or 19, depending on the province or territory of residence) **OR** certified by an official who has the authority to administer an oath or solemn declaration (recommended).

Signature(s) of person(s) giving consent

Signature of witness

or Signature of official

signature(s) of person(s) giving consent

dd/mm/yyyy

full name of witness

signature of witness

dd/mm/yyyy

city, province/territory

Signed before me on this

day of

month

year

by

name(s) of person(s) giving consent

signature of official

name / title of official

Questions regarding information in this consent letter should be directed to the person(s) giving consent.