



# home affairs

Department:  
Home Affairs  
**REPUBLIC OF SOUTH AFRICA**

Annexure C

## SUGGESTED FORMAT: PARENTAL CONSENT AFFIDAVIT (CONSENT FOR PERSON UNDER THE AGE OF 18 TO TRAVEL TO OR FROM THE REPUBLIC)

I/We\* hereby declare my/our consent that my/our daughter/son whose Unabridged Birth Certificate (UBC) or  
\*\*Equivalent document is attached may travel to and from South Africa:

Surname: \_\_\_\_\_ Name: \_\_\_\_\_ Date of birth \_\_\_\_\_  
Identified by Passport no: \_\_\_\_\_ is travelling from \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_ 20\_\_\_\_\_ \*\*\*\*  
and / or\*\* is a student / cared for at \_\_\_\_\_  
situated at (address) \_\_\_\_\_  
\_\_\_\_\_. Contact number of learning institution/place of care: \_\_\_\_\_

The child is accompanied / will be received in South Africa by (delete appropriately):

Surname, Name		
Relationship		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence

*Attach copy of South African ID or if a foreign national attach passport and visa of person receiving the child in SA.*

### Mother:

Surname, Name		
Residential Address		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence
Signature and date		

*Attach copy of mother's ID or passport.*

### Father:

Surname, Name		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence
Signature and date		

*Attach copy of father's ID or passport.*

**Legal Guardian:**

Surname, Name		
Residential Address		
Work Address		
Contact no. Work	Mobile	Residence
Signature		
Date		

*Attach legal guardian's appointment letter or court order and ID or passport.*

Copies of the following documents are attached:

- ☐ Unabridged Birth Certificate (UBC) or Equivalent Document of child travelling
- ☐ ID or Passport and Visa of person receiving child in the Republic
- ☐ Court Order (where applicable)
- ☐ Death Certificate (of any deceased parent reflected on the UBC or Equivalent Document)
- ☐ ID or Passport of parent(s) or legal guardian(s)

Thus signed and **\*\*sworn/solemnly affirmed before me on this ..... day of .....20.....**

.....

**OFFICE STAMP****Commissioner of Oaths**

*(May be attested free of charge at any embassy or mission of the Republic of South Africa)*

**First name(s):** .....

**Surname:** .....

**Capacity:** .....

**Place:** .....

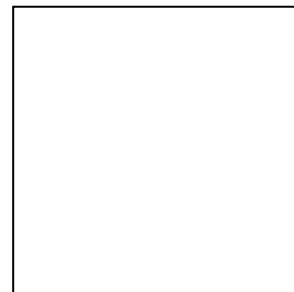
**Contact Number:** .....

*\*Both parents whose details appear on the UBC or Equivalent Document shall consent to the child's travel. Where only one parent's details appear, only such parent's consent is required.*

*\*\*Delete whichever is not applicable.*

*\*\*\*An Equivalent Document is any official document or letter issued by a foreign government (including a foreign embassy) or a letter issued by the Director-General of the Department of Home Affairs in lieu of an unabridged birth certificate and which serves as a confirmation of parentage of a person below the age of 18.*

*\*\*\*\*This document remains valid only for the period stipulated.*



***SUGGESTED FORMAT FOR USE BY FOREIGN GOVERNMENT INSTITUTIONS***

**EQUIVALENT DOCUMENT IN LIEU OF UNABRIDGED BIRTH CERTIFICATE:**

**[NAMES OF CHILD: .....; PASSPORT NUMBER: .....]**

1. This letter serves to confirm the particulars of the parent(s) or legal guardian(s) of the above-named child for the purpose of travelling to / from South Africa:

[Name of mother]

[passport number]

[Name of father]

[passport number]

[Name(s) of legal guardian(s)]

[passport number(s)]

2. This letter is valid for period of 12 (twelve) months from the date of signature.

[Name of Head of Office]

[Designation]

**DATE:**

**CONTACT NUMBER:**