

PARENTAL TRAVEL RELEASE FORM

To be completed for EVERYONE under the age of 18

THIS FORM **MUST BE** NOTARIZED!

Missionary Full Name	:	Dat	te of Birth: _	_//
To Whom It May Cond	cern:			
	ardian(s) of			
, -	n to the staff and leade issions, to take my/our o le 20 – July 13, 2019.	•		
**If both parents sha	re legal custody of the minor m	nissionary, both pa	rents' signatures	are required.
required, as well as a	oossesses legal custody of the r notarized copy of a legal docu ent, or a notarized copy of a de	ment evidencing th	ne custody	•
	guardian(s) of the minor missic legal document evidencing the		=	ell as a
THIS MUST BE	SIGNED IN THE PRES	SENCE OF A N	<u>IOTARY PUI</u>	<u>BLIC</u>
Printed Name	Signature	I	Jate signed:	<i>J</i>
Printed Name	Signature	!	Date signed:	<i>J</i>
FOR NOTARY USE:				
State of	, County of	·		
Signed or attested before	e on theday of	, 20.		
Notary Public	C	ommission expir	ation:/	/