

PARENTAL TRAVEL RELEASE FORM

To be completed for EVERYONE under the age of 18

THIS FORM **MUST BE** NOTARIZED!

Missionary Full Name: _		D	ate of Birth://	-
To Whom It May Concer	n:			
I/We the parent(s)/guar hereby give permission t known as Awe Star Miss Guatemala. The dates of	to the staff and lead ions, to take my/o	adership of Awe our child on a too	Star Ministries Inc., also	_
**If both parents share	egal custody of the min	or missionary, both	parents' signatures are required	
required, as well as a no arrangement/agreemen **If you are the legal gue notarized copy of the legal	tarized copy of a legal d t, or a notarized copy of ardian(s) of the minor n gal document evidencing	locument evidencing fadeath certificate fadeath certificate for signatures and the legal guardians	or a deceased parent. re is required, as well as a	
Printed Name	Signature		_ Date signed://	
Printed Name	Signature		_ Date signed://	
FOR NOTARY USE:				
State of	, County of	·		
Signed or attested before o	n theday of	, 20.		
Notary Public		Commission exp	oiration: / /	