

CONSENT TO TRAVEL FOR MINORS

**To be completed by both parents or legal guardians, with enclosed copies of IDs.
Must be accompanied by the MINOR'S ORIGINAL BIRTH CERTIFICATE + COPY
(if the certificate is not in English, provide English translation certified by the
Consulate of the issuing country)**

Date: _____

I, the undersigned,

I, the undersigned

Name and Last Name

Name and Last Name

born in

born in

_____ on _____
Place Date

_____ on _____
Place Date

residing at _____
Street Address, City and State

Depose and say:

that we authorize our minor son/daughter:

Name and Last Name

to travel into Italy and that we will take financial responsibility regarding all the expenses which he/she may incur during his/her stay in Italy.

Last name, First name: _____ *(please print)*

Signature _____

Last name, First name: _____ *(please print)*

Signature _____

Signature and seal of the Authority authenticating the signatures

(Consular Officer or Notary Public)

I acknowledge that I have read the personal data protection notice on the subject of the issuance of visa, as set forth by the General Regulation (EU) 2016/679 on the Protection of Personal Data.

Date .../... /...

Signature.....