**LETTER OF PARENTAL / GUARDIAN CONSENT**

To Whom It May Concern:

I (We), \_\_\_\_\_\_\_ (Full name(s) of custodial and/or non-custodial parent(s)/legal guardian(s)), am/are the (lawful custodial parent and/or non-custodial parent(s) or legal guardian(s)) of:

(child’s full name)

(date of birth)

(place of birth)

(Canadian passport number)

(passport expiry date)

(place of issuance of Canadian passport)

(child’s full name), has my (our) consent to travel with Emilia Vadacchino, English teacher, Templeton Secondary School, 777 Templeton Drive, Vancouver, BC Canada, V5L 4N8

WF488117 (Canadian or foreign passport number)

08 / APRIL / 2024 (passport expiry date)

Vancouver, British Columbia (place of issuance of passport)

to visit Ashland, Oregon, USA during the period of September 16 - September 20, 2019. During that period my child will be residing with **Emilia Vadacchino**, English Teacher, at the Ashland Commons Hostel, 423 Williamson Way, Ashland, Oregon 97520, USA. Phone: 541 292-4484

Any questions regarding this consent letter can be directed to the **Parents/Guardians**:

Number / street address / apartment number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City / Province / Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (Work and Residence): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names of custodial and/or non-custodial parent(s) or legal guardian(s) **(printed)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature(s) of custodial and/or non-custodial parent(s) or legal guardian(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date