

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Subject: Cross-Border Travel Consent for [Child's Full Name]

To Whom It May Concern,

I, [Your Full Name], am the [Relationship to Child, e.g., father/mother/legal guardian] of [Child's Full Name], born on [Child's Date of Birth]. I hereby give my full consent for my child to travel to [Destination Country] from [Start Date] to [End Date] for [Purpose of Travel, e.g., vacation, visit family, etc.].

Accompanying my child will be [Accompanying Adult's Full Name], who is [Relation to Child]. I trust that [Accompanying Adult's Name] will take all necessary precautions for my child's safety and well-being during this trip.

Please do not hesitate to contact me at [Your Phone Number] or [Your Email Address] if you require any further information or verification.

Sincerely,

[Your Signature]
[Your Printed Name]
[Date]

[Optional: Notary Public Section]

[Notary's Name]
[Notary's Title]
[Seal/Stamp]
[Date of Notarization]