

Child Travel Authorization Form with Medical Consent

A **Child travel authorization form sample** with medical consent is an essential document that grants permission for a minor to travel independently or with a designated adult while ensuring their health needs are addressed. It includes crucial details about the child's identity, travel plans, emergency contacts, and authorization for medical treatment if necessary. This form helps safeguard the child's safety and provides peace of mind to parents and guardians during travel.

Child Information

Full Name of Child:

Date of Birth:

Passport/ID Number:

Travel Details

Travel Destination(s):

Travel Dates:

Accompanying Adult(s) (if any):

Parent/Guardian Information

Full Name of Parent/Guardian:

Relationship to Child:

Contact Number:

Email Address:

Emergency Contact Information

Emergency Contact Name:

Emergency Contact Phone:

Relationship to Child:

Medical Consent

I, the undersigned, authorize any necessary medical treatment for my child named above in case of emergency during the course of travel. I understand that every reasonable effort will be made to contact me prior to any medical treatment. Should efforts to contact me fail, I hereby give permission to the physician/hospital selected to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Known Allergies/Medications:

Signature

Date:

Parent/Guardian Signature:

Note: This form may need to be notarized depending on your country or airline requirements.