

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 (DD/MM/YY): _____

Place of birth: _____

Canadian passport number: _____

Date of issuance of Canadian passport (DD/MM/YY): _____

Place of issuance of Canadian passport: _____

_____ (child's full name), has my (our) consent to travel with:

Full name of accompanying person: _____

Canadian or foreign passport number: _____

Date of issuance of passport (DD/MM/YY): _____

Place of issuance of passport: _____

to visit UNITED STATES OF AMERICA during the period of _____ (dates of travel: departure and return). During that period,

_____ (child's full name) will be residing at Camp Tekakwitha at the following address:

67, Camp Tekakwitha road
Leeds, Maine, 04263
207-524-3101

Any questions regarding this consent letter can be directed to the undersigned at:

Number/street address: _____

City, province/state, country: _____

Telephone and fax numbers (work and residence): _____

Name(s): _____

Signature: _____

Signature: _____

Date: _____

(Full name(s) _____ and signature(s) of custodial parent, and/or non-custodial parent(s) or legal guardian(s))

Signed before me, _____ (witness name), this _____ (date) at

_____ (place).

Signature: _____