**PARENTAL CONSENT AFFIDAVIT**

**(CONSENT FOR PERSON UNDER THE AGE OF 18 TO TRAVEL TO OR FROM THE REPUBLIC OF SOUTH AFRICA)**

I/We\* hereby declare my/our consent that my/our daughter/son whose Unabridged Birth Certificate (UBC) or

\*\*Equivalent document is attached may travel to and from South Africa:

Surname: Name: Date of birth

Identified by Passport no: is travelling from to

 for the period to 20 .\*\*\*\*

The child is accompanied / will be received in South Africa by (delete appropriately):

|  |  |  |
| --- | --- | --- |
| Surname, Name |  |  |
| Relationship |  |
| Identified by\*\* |  | I.D. no.Passport no. |  |
|  |
| Residential Address |  |
|  |
| Work Address |  |
|  |
| Contact no. Work | Mobile | Residence |

*Attach copy of South African ID or if a foreign national attach passport and visa of person receiving the child in SA.*

**Mother:**

|  |  |  |
| --- | --- | --- |
| Surname, Name |  |  |
| Residential Address |  |
|  |
| Identified by\*\* |  | I.D. no.Passport no. |  |
|  |
| Contact no. Work | Mobile | Residence |
| Signature |  |
| Date |  |

*Attach copy of mother’s ID or passport.*

**Father:**

|  |  |  |
| --- | --- | --- |
| Surname, Name |  |  |
| Residential Address |  |
|  |
| Identified by\*\* |  | I.D. no.Passport no. |  |
|  |
| Contact no. Work | Mobile | Residence |
| Contact no. |  |
| Signature |  |
| Date |  |

*Attach copy of father’s ID or passport.*

**Legal Guardian:**

|  |  |  |
| --- | --- | --- |
| Surname, Name |  |  |
| Date of birth |  |
| Residential Address |  |
|  |
| Identified by\*\* |  | I.D. no.Passport no. |  |
|  |
| Contact no. Work | Mobile | Residence |
| Contact no. |  |
| Signature |  |
| Date |  |

*Attach legal guardian’s appointment letter or court order and ID or passport.*

Copies of the following documents are attached:

Unabridged Birth Certificate (UBC) or Equivalent Document of child travelling

ID or Passport and Visa of person receiving child in the Republic

Court Order (where applicable)

Death Certificate (of any deceased parent reflected on the UBC or Equivalent Document) ID or Passport of parent(s) or legal guardian(s)

**Thus signed and \*\*sworn/solemnly affirmed before me on this …………. day of ………….20...**

**…………………………………………………………. OFFICE STAMP Commissioner of Oaths**

*(May be attested free of charge at any embassy or mission of the Republic of South Africa)*

**First name(s): ……………………………………… Surname: …………………………………………… Capacity: ……………………………………………. Place: …………………………………………………**

*\*Both parents whose details appear on the UBC or Equivalent Document shall consent to the child’s travel. Where only one parent’s details appear, only such parent’s consent is required.*

*\*\*Delete whichever is not applicable.*

*\*\*\*An Equivalent Document is any official document or letter issued by a foreign government (including a foreign embassy) or a letter issued by the Director-General of the Department of Home Affairs in lieu of an unabridged birth certificate and which serves as a confirmation of parentage of a person below the age of 18.*

*\*\*\*\*This document remains valid only for the period stipulated.*