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| --- | --- |
| To Port Authority:  | Border Police |
| Name (as in passport): | Child Name | Last Name:  | Child Surname |
| Name & Last Name of Father (as in passport):  |  |
| Name & Last Name of Mother (as in passport): |  |
| Date of Birth:  | (Child) |
| Place and country of Birth: | Sweden  |
| Passport number and type:  | (Child) |  |  |
| Residence (country): | Sweden | Street:  |  | No: |  | Postcode: |  |
| Phone: |  |

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|  |
| I (Mother/Father)) with passport No.XXX and I (Mother/Father) with passport number XXXX here by allow our |
| child (Name of child) with passport number XXX to travel to Saranda, Albania, with Mr XXXX with passport  |
| number XXX. Departure date from Ioannina (Date) |
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| --- | --- |
| Date: | 2019- |

Signature of mother: Signature of father: