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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 is the mother/father of the child (name of child) with passport no XXX.  |
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| Date: | 2019- |

Signature of mother: Signature of father: