**Consulat Général de France**

Prominence in Buckhead - Suite 1840
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**République Française**

# PARENTAL AUTHORIZATION

I the undersigned, hereby, authorize the issuance of a visa to my: ☐ Son ☐ Daughter

_____, minor born on _____
NAME DATE OF BIRTH

_____, minor born on _____
NAME DATE OF BIRTH

I also declare under oath that:

(Please check one)

☐ I have full parental authority of this minor, I am not divorced or separated and have not initiated divorce proceedings.

☐ I have full legal and physical custody of this minor.

During his/her stay in France, he/she will be traveling with _____.
He/She will be staying with _____ and residing at _____. _____ will pick my son/daughter up at the airport and will have full parental authority of him/her during his/her stay in France.

I declare under penalty of perjury under the laws of Georgia that the foregoing is true and correct.

Father's Name: _____ Mother's Name: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Signature: _____ Signature: _____

Notary: _____
NAME AND SIGNATURE DATE

Seal: