

Authorization for Student Single Room

As the legal guardian, I / we authorize the underage person below to stay in a single room at the following hotels: XXXXX, (+ city) and XXXXX, (+ city).

Name of student:	xx
Date of birth:	XX
Nationality:	XX
Passport Number:	XX
Passport Issue Date:	XX
Outbound date of trip:	xx
Return date of trip:	XX
Name of School:	XX
Location of School:	XX

The authorized person travels under the responsibility of:

Legal name:	хх
Date of birth:	xx
Nationality:	xx
Passport number:	xx
Relationship:	ХХ

Legal guardian

Please attach a copy of the passport of the legal guardian.

Name:	хх
Passport Number:	хх
Email:	хх
Telephone:	хх
Place of signature:	хх
Date of signature:	хх
Signature:	хх



Hammock Expeditions, LLC 51. Hillcrest Way Bluffton, SC, 29909 USA P: 984.223.9866 www.STEMstudytours.com www.HammockExpeditions.com

