



**AUTHORITY FOR  
UNDER 18 YEAR OLDS**

I, \_\_\_\_\_  
(Parent/s full name)

of \_\_\_\_\_  
(Home address)

\_\_\_\_\_  
(Contact phone number)

agree for my son/daughter

\_\_\_\_\_  
(Student's date of birth)

\_\_\_\_\_  
(Student's ID number)

\_\_\_\_\_  
(phone number or email address)

to reside/live with

\_\_\_\_\_  
(Guardians full name)

at \_\_\_\_\_  
(Guardians full home address)

\_\_\_\_\_  
(Contact phone number)

for the duration of

\_\_\_\_\_  
(Length of time/period)

Full Name \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_