

TOUR NAME: TOUR DATE:



PARENTAL / GUARDIAN CONSENT FORM for minors

(18 years of age and younger)





Full name of Parent /Le	and Cuardian	
Full name of Parent/Le	gai Guaraian	
Telephone & Email:		
Telephone	Email	
am the parent, legal guard parental authority over the	dian or other authorized person or organization w following child / minor:	vith custody rights, access rights or
INFORMATION ABOUT	TRAVELLING CHILD	
Name:		
Child's / minor full name		
Date of Birth:		
DD/MM/YY		
SIGNATURE OF PERSO	N GIVING CONSENT	
give my consent for this various divisions	child / minor to travel on all tours operated b	y Discover Canada Tours and it's
DCSA, West Trek Tours, D	estination Snow, Club ESL) which may include	e, but is not limited to, tours to the
Jnited States, Rocky Mountains, Vancouv	er Island and Whistler.	
Signature of person giv	ing consent	DD/MM/YY

