



Child Letter of Authorization

Letter of Authorization (Children Under 16)

I, _____,
(first name) (middle initial) (last name)

authorize It's Easy to submit my child's passport application and pick up the passport when issued

for my child _____ with
(Child's first name) (Child's last name)

Date of Birth ____ / ____ / ____.

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

_____/_____/_____
Date of Birth of Parent or Legal Guardian