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| |  | | --- | | **Authority Letter**  Minor Travel Alone |  |  | | --- | | To  [Receiver Name]  [Receiver Title]  [Addess]  [Email] | |  | | From  [Sender Name]  [Sender Title]  [Addess]  [Email] | | |  | | --- | |  | |  |   Dear Jennifer Brown,  I am writing this letter to inform you that I, Sarah Johnson, am the parent/legal guardian of Emily Johnson, who is a minor born on July 15, 20XX. I hereby grant permission for my child to travel alone to Seattle, Washington, to attend your appointment scheduled for August 15, 20XX, at Westside Medical Center, located at 789 Oak Avenue, Seattle, Washington. The purpose of this trip is to seek medical consultation and treatment for Emily's ongoing orthopedic condition.  I have full confidence in Emily's ability to manage this journey responsibly and adhere to all guidelines and instructions provided. To ensure her safety and well-being throughout the trip, Ms. Jessica Martinez, a registered nurse with extensive experience in pediatric care, will be accompanying and supervising Emily during the entire duration of her travel and stay in Seattle.  Ms. Jessica Martinez is affiliated with Children's Health Companion, an organization specializing in providing comprehensive support and care for young patients traveling for medical purposes. Ms. Martinez's qualifications and dedication to pediatric care give me the assurance that Emily will receive the necessary attention and assistance.  I understand the importance of this medical appointment and have made all necessary travel and accommodation arrangements to facilitate Emily's journey. I have attached a copy of my passport and Emily's birth certificate along with this letter for your reference.  I authorize Ms. Jessica Martinez and Children's Health Companion to make any necessary decisions on my behalf related to Emily's travel, medical treatment, and accommodation arrangements. I also grant permission for any medical procedures or treatments recommended by the specialist at Westside Medical Center to be administered to Emily, in my absence, if deemed necessary.  Please ensure that Emily's safety, comfort, and well-being are prioritized throughout her journey. I kindly request you to keep me informed of any developments, progress, or concerns regarding Emily's travel and medical treatment.  Thank you for your assistance and cooperation in this matter. I trust that Ms. Jessica Martinez and Children's Health Companion will provide the necessary support and care to ensure a smooth and successful trip for Emily.  Please do not hesitate to contact me at (555) 123-4567 or sarah.johnson@email.com if you require any further information or have any questions.  Sincerely,  Sarah Johnson  Mother and Legal Guardian of Emily Johnson  (555) 123-4567  sarah.johnson@email.com |