Address of the undersigned:

Phone:	

Mobile: _____

E-mail: _____

Attn: Embassy of Switzerland in Wellington

CONSENT

I, the undersigned, Mr/Mrs/Ms ______ in my capacity as parent or legal guardian will not be able to be present at the biometric data registration appointment and consent hereby to the issuing of a Swiss identity document (passport and/or identity card) for:

my child/children:	1) _	
(name, surname and date of birth)	2) _	
	3) _	
	4)	
	· _	

My child/children will be accompanied by his/her/their mother/father

_____ (name, surname and date of birth).

Place and date

Signature

Enclosed: copy of my valid and signed passport (compulsory)

Original document to be presented by the attending parent/guardian at the appointment.
Do not send by email.