

Limited Power of Attorney for Tour Participation

Traveler Name: _____

Parent/Guardian Name: _____

Tour Destination & Dates: _____

Group Leader Name: _____

Our records indicate that your child is traveling on an educational tour with **Passports**. Because your child is under the age of 18, there may be situations in which the Group Leader will need to be authorized to sign necessary documents on your behalf. By signing below, you grant the Group Leader the authority to sign any required documents for your child's participation in tour-related activities, including but not limited to waivers, permission slips, liability releases, and any other agreements necessary for engagement in planned excursions or experiences.

This document serves as a **Limited Power of Attorney**, ensuring that the Group Leader may act on your behalf as needed during the tour. Your agreement is **completely voluntary**. If you choose not to sign this document, your child may still participate in the tour but may not be able to take part in certain activities that require prior authorization.

Authorization Granted

I acknowledge and agree that:

- My child is traveling under the supervision of the Group Leader and, by signing below, I authorize the Group Leader to sign necessary documents on my behalf for my child's participation in tour-related activities.
- I do hereby delegate the Group Leader a Limited Power of Attorney to sign any required forms, including but not limited to waivers, liability releases, participation agreements, and other necessary documentation.
- I understand that this authorization is limited to the duration of the tour and is granted to facilitate my child's participation in all planned and available tour experiences.
- I accept full responsibility for my child's participation in the tour and any activities authorized under this agreement.

By signing below, I confirm that I have read and understood this document, and I voluntarily grant this Limited Power of Attorney to the designated Group Leader for the purpose stated above.

Parent/Guardian's Signature: _____ **Date:** _____