

UNACCOMPANIED MINOR FORM

(Fill out & bring 3 copies to the airport)

MINOR PERSONAL DATA							
NAME	AGE	M/F	FLIGHT	FROM	то	SEAT	ALLERGIES/MEDICAL CONDITIONS
1.							
2.							
ADDITIONAL INFORMATION (SPE	ECIAL SE	RVICE RI	EQUEST / L	ANGUAGES	SPOKEN /	OTHERS)	
SPECIFY ADDITIONAL INFORMATION/ REQUEST							
1.							
2.							
PARENT/GUARDIAN AT DEPARTURE PARENT/GUARDIAN AT ARRIVAL							
First / Last name First / Last Name					st Name		
Address							
City / Country Phone Number				City / Country Phone Number			
Parent / Guardian Signature Parent / Guardian Signature							
JETAIR TO COMPLETE							
Origin Airport Agent	Cabin Crewmember					Destination Airport Agent	
Name	Name					Name	
Signature		Signature				Signature	
DISCLAIMER As the guardian / parent of the Child / Children, I agree information I'm providing is correct. I confirm that I hav Children is/are not met at destination, I authorize Jetair the Child / Children to the destination of departure. I agresulting from taking such action. I confirm that the Child by applicable by each country to which the Child / Children I have read and understand the rules for Unaccor	e arrange to take wh gree to reid d / Childre en is trave	d for the C natever act mburse Jet n has all ne elling. Jetai	hild / Childrer ions it conside air any cost it ecessary trave r is not respon	n to be met upo ers necessary to may incur taki I documents, a nsible for any n	on arrival by to ensure the G ing such actions swell as enou	the Guardian / Child / Children on and hold har ugh funds to pa	Parent listed above. If the Child / safe custody, including returning mless from and against all claims y any transit fees / taxes required
Parent / Guardian Name		Signature					