DECLARATION

IN THE MATTER OF: _____

_____ **,** born _____

****FULL LEGAL NAME OF CHILD**** **DATE OF BIRTH**

We, _____ (**Name of Father**) and _____ (**Name of Mother**), of the City of _____, in the Regional Municipality of Waterloo, **CONFIRM THAT:**

1. We are the natural parents of _____**FULL LEGAL NAME OF CHILD** (hereinafter referred to as _____ "**FIRST NAME OF CHILD**") who was born on _____ (**DATE OF BIRTH**).

2. _____ **(FIRST NAME OF CHILD)** lives with us, at _____ **(ADDRESS)**. Our contact numbers are **( )** _____ **(home), ( )** _____ **(work), and/or ( )** _____ **(cell)**.

   or

   We are legally separated and _____ **(FIRST NAME OF CHILD)** lives with ***her mother/father*** (circle) at _____ (**ADDRESS)**. Our contact numbers are **( )** _____ **(home), ( )** _____ **(work), and/or ( )** _____ **(cell).**

3. We hereby consent to _____ **(FIRST NAME OF CHILD)** travelling by vehicle to and from _____ (***location***) with _____**(*adult designate*)**, leaving from _____ (***location***), on _____ ***(date)*** and returning to _____ (***location***) on _____ ***(date)***.

4. We further authorize and direct _____ (***adult designate***) to give consent to treatment for _____ **(FIRST NAME OF CHILD)** on our behalf, in the event that emergency medical treatment is required for her and we are not available to provide such consent.

SIGNED at the City of _____,)
in the Regional Municipality of Waterloo,)
this __ day of _____, 20__.)

)
)
_____) _____
WITNESS TO SIGNATURE OF FATHER) SIGNATURE OF FATHER
)
)
)
_____) _____
WITNESS TO SIGNATURE OF MOTHER) SIGNATURE OF MOTHER