

AUTHORIZATION FOR BRAZILIAN VISA ISSUANCE FOR MINORS (under 18 years of age).

(The following content is mandatory)

We hereby authorize the issuance of a Brazilian Visa (...type of visa...), for a stay in Brazil of (...total of days, months or years) from (day/ month/ year) ... to ... (day/month/year) ... for the following minor:

I - MINOR'S INFORMATION

Full Name.....
Passport Number.....
Date of Birth: Day/Month/Year.....
Place of Birth (City, State, Country).....

II - PARENT'S INFORMATION * (or legal guardian (s)) **

1) Father's Full Name.....
Passport or ID NumberIssued on
Issued by:

2) Mother's Full Name.....
Passport or ID Number:Issued on :.....
Issued by:

III - FORMAL STATEMENT

We declare that the above information is true and accurate.

1) Place Date (Day/Month/Year): 2) Place Date (Day/Month/Year):

Father's Signature

Mother's Signature

IV - NOTARY'S CERTIFICATION *

NOTARY'S CERTIFICATION FOR
FATHER'S SIGNATURE

NOTARY'S CERTIFICATION FOR
MOTHER'S SIGNATURE

Notary: Please validate signees using
ONE STAMP PER SIGNATURE.

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ONE STAMP PER SIGNATURE.

* If one parent has passed away, an apostilled copy of the Death Certificate is required along with this authorization signed by the other parent;

** An apostilled copy of the document indicating the guardianship is mandatory.