



UNACCOMPANIED MINOR (UMNR) FORM

The following details are to be filled by parent(s)/guardian.
Please print two (2) copies for return journey.

Unaccompanied Minor Details

Guest Name: _____
Age: _____ Sex: _____
Passport No.: _____ Booking Reference (PNR): _____
Parent(s)/Guardian Name: _____
Phone No.: _____
Address: _____

Flight Information

Flight No.	Date	Cabin Class	From	To
Special Instruction			Issuing Office	
Kindly declare if minor has known allergy / medical condition(s)				

PERSON MEETING AT TOWN TERMINAL / AIRPORT

Point of Departure

Name: _____
Contact No.: _____
Relationship: _____
Address: _____

Point of Arrival

Name: _____
Contact No.: _____
Relationship: _____
Address: _____

Transfer Point (if applicable)

Name: _____
Contact No.: _____
Relationship: _____
Address: _____



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Declaration of Parent(s) / Guardian	
<p>1. I acknowledge that I shall be responsible in ensuring that "the Minor" has my permission to travel unaccompanied on this flight. I confirm that I have full authority to give such permission in accordance with the applicable laws and regulations. I confirm that I am not restricted from giving such permission due to any order or direction from a court of law or authority.</p> <p>2. I confirm that I have arranged for the mentioned minor to be accompanied to the departure airport and met at the arrival airport, by the person(s) named. These persons will remain at the departure airport until the flight has departed; be available at the arrival airport at the scheduled time of arrival. I also acknowledge that the person meeting the minor on arrival, has been advised to carry suitable personal identification, and will present this as requested.</p> <p>3. Should the journey require a transit stop in excess of four (4) hours, I confirm that the minor will be met at the transit stop by the person named, and attended at the transit stop until the connecting flight / transport has departed. By prior arrangement, this transit attendance may be arranged by the Carrier, and I agree to pay, in advance, all reasonable costs that may be associated with that attendance.</p> <p>4. Should the minor not be met at the arrival (or transit stop) airport, I authorize the Carrier(s) participating in the carriage, to take whatever action they consider necessary to ensure the minor's safe custody and well-being, including return to the airport of departure if necessary, I agree to indemnify and reimburse the Carrier(s) for any and all reasonable costs and expenses incurred by them in taking such action.</p> <p>5. In the event the minor's carriage is delayed en-route, is required to make an unscheduled stop, or terminates at an unscheduled destination, I authorize the Carrier(s) participating in the carriage, to take whatever action they consider necessary to ensure the minor's safe custody and well-being, including use of alternative transport.</p> <p>6. I confirm that the minor is in possession of all travel documents such as passport, visa, health certificate, etc. may be required for the journey.</p> <p>7. I acknowledge and understand that the minor's travel is subject to the applicable Carrier(s)' condition of carriage (which can be accessed on the relevant Carrier(s)' website) and applicable laws and regulations.</p> <p>8. I confirm that the minor will NOT require special services during the journey, other than those the Carrier(s) can reasonably be expected to provide.</p> <p>9. I agree and acknowledge that any personal information provided will be processed by the Carrier(s) for the purpose of handling the travel of the Minor in accordance with applicable policy, laws and regulations.</p> <p>10. I, the undersigned, parent or guardian of the mentioned minor, agree to and request the unaccompanied carriage of the minor named, and certify that the information provided is true and accurate.</p> <p>11. I confirm the minor is comfortable travelling alone.</p>	

Name _____ Signature _____

Parent(s) / Guardian to acknowledge upon completion of service

Name: _____
 Relationship: _____
 Location: _____

I hereby confirm UMNR Guest as per stated have safely
 (Please tick applicable box only)

- Depart from original country
- Arrival from depart country

Signature _____ Date _____

FOR RB OFFICE USE ONLY					
Origin Airport Ground Staff Location – Check-in Counter		Inflight Crew Member Location – Onboard		Destination Airport Ground Staff Location – Upon Arrival	
Name		Name		Name	
Staff No.		Staff No.		Staff No.	
Signature		Signature		Signature	
Date		Date		Date	