

Unaccompanied Minor Form

(please complete all sections of this form)

A. Unaccompanied Minor Details

Booking Reference: _____

First Name	Family / Surname	Gender	Age
Special Instructions (i.e. allergies / languages) →			

B. Flight Details

Flight No	Flight Date	From	То
FC	11		

C. Staff Declaration

Check-In	Check-In	Gate Agent	Gate Agent	Flight Crew	Flight Crew
To Sign	ASIC Number	To Sign	ASIC Number	To Sign	ASIC Number

D. Person Accompanying Child to Airport (Departure)

Full Name			
Address			
Phone	(H)	(W)	(M)
Relationship to Child			
Gender			
Signature (to be signed at Check-In)			

E. Person Meeting Child at Airport (Arrival)

Full Name						
Address						
Phone	(H) (W)			(M)		
Relationship to Child						
Gender						
Signature (to be signed on collection)			Photo ID Sighted (ID Details/Number)	Arri	val Staff to Sign	Arrival Staff ASIC Number



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F. Parent / Guardian Declaration

I am the Parent / Guardian of the Child referred to in section A. I have legal responsibility for the Child and am able to make this declaration and give permission for him / her to travel as an Unaccompanied Minor with Link Airways. In consideration of Link Airways agreeing to carry the Child as an Unaccompanied Minor, I make the following declaration:		Full Name:			
		Relationship to Child:			
 1. 2. 	I confirm I have arranged for the Child to be escorted to the airport by the person identified in section C. The person identified in section C agrees to remain at the airport until the flight has departed. I confirm I have arranged for the Child to be met at the airport by the person	Address:			
2.	identified in section D at the scheduled arrival time for the flight (or any other time as advised by, or on behalf of Link Airways). The person identified in section D is aware they are required to produce valid photographic identification before Link Airways crew will release the Child into their custody and care. I acknowledge that I am solely responsible for ensuring these instructions are conveyed to, and complied with by, the person identified in section D.	Phone:	(H) (W)		
3.	In the event the person identified in section D fails to meet the Child at the destination, or in the event Link Airways is not satisfied with the identification produced by the person identified in section D, I expressly authorise Link		(M)		
	Airways to take whatever action they consider reasonably necessary to ensure the safety and custody of the Child including the return of the Child to the airport of departure, and I agree to indemnify and reimburse Link Airways for all costs and expenses incurred in doing so.		I declare that I am the Parent / Legal Guardian of the Child named in section A above and:		
4.	I confirm and warrant that all information provided on this form (including any Special Instructions in section A) has been completed by me and is accurate and complete. Where I have given special instructions in section A of this form, I acknowledge and agree that while Link Airways will make reasonable efforts to carry out any special instructions, Link Airways shall have no liability for doing so, or for failing to do so, whichever may be applicable.	travel al	o and request the Child one;		
5.	I give specific consent for Link Airways to provide or authorise immediate and/or emergency medical treatment to the Child while in Link Airways care. I understand and agree that Link Airways will provide the person identified in section D above with information about any immediate or emergency medical treatment rendered to the Child while in Link Airways Care and it is the responsibility of the person in section D above, to inform the person identified in section C. I agree to indemnify and hold harmless Link Airways for acting in reliance upon this authorisation.	I certify the information provided in this form is accurate; I have read, understood and accept paragraphs 1 to 11 (left).			
6.	I certify the Child possesses all travel documents required by law and agree Link Airways is not responsible for obtaining any travel documents which may be required, missing or defective.	Name:			
7.	I certify that the Child's baggage contains no item that is prohibited from carriage or in contravention of Link Airways Conditions of Carriage.				
8.	I understand and acknowledge that Link Airways will not be responsible for nor will in any way safeguard any valuables the Child may be carrying whilst in Link Airways custody and care.	Signature:			
9.	I provide specific consent for the personal information provided on this form being used or disclosed to the person identified in section D above, or in any other way pursuant to Link Airways Privacy Policy.				
10.	I acknowledge the Child's carriage is subject to Link Airways Conditions of Carriage (available on Link Airways website) and all applicable laws.				
11.	To the maximum extent possible, I agree to indemnify and hold harmless Link Airways (including its officers, agents and employees) against any and all claims made by or on behalf of the Child and/or any person arising out of the Child's travel with, or care by, Link Airways.	Date:			

If you need help completing this form, or you require a blank form to be sent to you, please contact Link Airways at www.linkairways.com or reservations@linkairways.com.