

**SPECIAL POWER OF ATTORNEY
AND PARENTAL CONSENT**

I, _____, of legal age and presently residing at _____, after being sworn to in accordance with law, do hereby depose and state:

1. That I am the biological parent of the following minor/s:

FULL NAME	AGE

2. That I do hereby name, constitute, appoint and authorize, _____, _____ citizen, of legal age, residing at _____, to be my true and lawful attorney, for me and in my name, place and stead, represent and sign in my behalf, and to accompany and prepare all documents necessary for the passport application of my child/children;
3. That I am executing this affidavit to verily affirm my consent and agreement and attest to the truthfulness of the foregoing facts.

IN WITNESS WHEREOF, I have hereunto set my hands this _____ 20_____, in Wellington, New Zealand.

Principal

Passport/ID no.: _____
Issued on: _____
Issued in: _____

Signed in the presence of:

SUBSCRIBED AND SWORN to before me this _____ day of _____, in _____.

Doc. No. _____;
Service No. _____;
Page No. _____;
Book No. _____;
Series of _____;

Notary Public