



## PARENTAL CONSENT FORM

### Consent for accommodation without an accompanying adult

*This form must be completed by a parent or legal guardian if the child is staying at Danhostel Copenhagen City without being accompanied by an adult.*

\_\_\_\_\_  
Name of parent/legal guardian:

\_\_\_\_\_  
Address:

\_\_\_\_\_  
Phone number:

\_\_\_\_\_  
Child's name:

\_\_\_\_\_  
Date of birth:

### The stay at Danhostel Copenhagen City

\_\_\_\_\_  
Arrival date:

\_\_\_\_\_  
Departure date:

I/we confirm that we are aware of and consent to the stay, and that the child is permitted to stay at Danhostel Copenhagen City without an accompanying adult.

I/we can be contacted at the above phone number for the entire duration of the stay.

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Signature (parent/legal guardian):

\_\_\_\_\_  
Name (in block letters):

*The completed document must be presented upon arrival or sent in advance by prior agreement.*