



PARENT/GUARDIAN CONSENT FOR MINOR VISIT AND/OR ESCORT

Name: _____

DOC number: _____

Notarized, written permission from the legal authority of a minor is required before the child may visit an incarcerated individual. A signature from the legal authority is required to process the minor visitor form.

I affirm that I have legal authority to make decisions on behalf of the minor(s) listed below. I understand that visits in Prison are likely contact visits, but may be no-contact visits.

Minor name (print)	Month and year of birth	Minor name (print)	Month and year of birth

As legal authority, I authorize the following individuals to escort the minor(s) listed on this form to visit the above named incarcerated individual.

Anyone who will be escorting the minor(s), including the minor(s) parents, must be listed on this form.

Adult escort name	Month and year of birth	Relationship to minor	Adult escort name	Month and year of birth	Relationship to minor

LEGAL AUTHORITY CONSENT

Sign in the presence of a Notary Public _____

Legal authority name (print)

Signature

Date

I do swear either from personal knowledge or from satisfactory evidence, that the signature on this form is that of the person before me as named in this document.

SUBSCRIBED AND SWORN BEFORE ME THIS _____ Day OF _____ Month, Year

SEAL

Notary seal is not required when submitted by DCYF for a minor who is in the care of the State

NOTARY PUBLIC signature

Notary Public in and for the state of: _____

County of: _____

Name: _____

My commission expires: _____

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 00-03, RCW 42.56, and RCW 40.14.

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