



To Whom It May Concern – With respect to St Francis Xavier Baseball Academy – Clearwater, Florida

I (We), _____ (full name(s) of custodial and/or non-custodial parent(s)/legal guardian(s)), am (are) the _____ (lawful custodial parent and/or non-custodial parent(s) or legal guardian(s)) of

Child's full name: _____
Date of birth (DD/MM/YY): _____
Place of birth: _____
Canadian passport number: _____
Date of issuance of Canadian passport (DD/MM/YY): _____
Place of issuance of Canadian passport: _____

_____ (child's full name), has my (our) consent to travel with

Full name of accompanying person: **Lawrence Sheen Bromley**
Canadian or foreign passport number: **JR575769**
Date of issuance of passport (DD/MM/YY) **14/4/07**
Place of issuance of passport: **Edmonton, Alberta, Canada**

to visit United States during the period of **19/03/10 to 28/03/10**. During that period, _____ will be residing with **Lawrence Sheen Bromley** at the following address:

Number/street address and apartment number: Day Inn Hotel – 3910 Ulmerton Road
City, province/state, country: Clearwater, Florida, USA 33762
Telephone and fax numbers
Phone 727-573-3334 Fax: 727-572-4845 Cell: 780-238-6275

Any questions regarding this consent letter can be directed to the undersigned at:

Number/street address and apartment number: _____
City, province/state, country: _____
Telephone and fax numbers (work and residence): _____

Signature(s): 1) _____ 2) _____

(Full name(s) and signature(s) of custodial parent, and/or non-custodial parent(s) or legal guardian(s))

Date: _____

Signed before me, _____ (name of witness),

this _____ (day) _____ (Month) _____ of 2010

at _____ (name of location).

Signature: _____ (name of witness)