

dd/mm/yyyy

National Astronomical Research Institute of Thailand (Public Organization) Princess Sirindhorn AstroPark 260 Moo 4, Donkaew, Mae Rim, Chiang Mai, 50180 Thailand Tel: +66 53 121268 9 Fax: +66 53 121 250 www.narit.or.th



Letter of Consent to attend the ASEAN Astronomy Camp (AAC) March 10-13, 2026

To whom it may concern,		
I / We,	full name(s) of parent(s) / person(s) / organization giving consent street address, city	
Address:		
Telephone and email:	province/state, country	
am / are the parent(s), legal guardian(s) or other au or parental authority over the following participant:	telephone uthorized person(s) or organization with	email custody rights, access rights
Information about travelling participant		
Name:		
Date and place of birth:	child's full name	
Number and date of issue of passport (if available):	dd/mm/yyyy	city, province/territory
Issuing authority of passport (if available):	number	dd/mm/yyyy
	country where passport was issued	
Information about accompanying person		
☐ This child has my / our consent to travel alone ☐ This child has my / our consent to travel with		
Name:		
Relationship to child:	full name of accompanying person mother, father, grandparent, sister, brother, relative, friend, other	
Number and date of issue of passport:		
Issuing authority of passport:	number	dd/mm/yyyy
Contact information during trip	country where passport was issued	
I / We give our consent for this child to travel to:		
Destination(s):	National Astronomical Research Institute of Thailand, Chiang Mai, Thailand name of destination country / countries March 10-13, 2026	
Travel dates:		
	date of departure to date of return National Astronomical Research Institute of Thailand (Public Organization)	
at the following address(es)	National Astronomical Research Institute of	Inaliand (Public Organization)
	Princess Sirindhorn AstroPark 260 Moo 4, Donl	kaew, Mae Rim, Chiang Mai, 50180
Telephone and email	Tel. +66 53 121268 ext 232 Email: aac@narit	t.or.th
☐ I understand that, if selected, I must provide for	the participant's travel expenses to Chi	ang Mai myself
Signature(s) of person(s) giving consent		
full name		
signature(s) of person(s) giving consent		