



PERMISSION TO TRAVEL

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|---|-------------------|------|----------------|
| PERMISSION BY A PARENT FOR A 0-17 YEAR-OLD PASSENGER | | | |
| FULL NAME OF THE CHILD/TEENAGER | | AGE | DATE OF BIRTH |
| FIRST NAME, NICKNAME, FAMILY NAME | | | |
| INFORMATION ABOUT THE VOYAGE | | | BOOKING NUMBER |
| SHIP | DATE OF DEPARTURE | FROM | TO |
| | | | |
| | | | |
| | | | |
| NAME OF THE PARENT/GUARDIAN OF THE CHILD/TEENAGER'S PARENT/GUARDIAN | | | |
| NAME, ADDRESS, TELEPHONE NUMBER | | | |
| | | | |
| THE AUTHORIZED PERSON | | | |
| NAME, ADDRESS, TELEPHONE NUMBER | | | |
| | | | |
| SIGNATURE OF PARENT/GUARDIAN | | | DATE |
| | | | |

I hereby authorise the above-mentioned individual to act as the supervisor of my child during the above voyage and, in this capacity, to take care of him/her during the entire voyage.

The supervisor shall:

- board the ship, together with the child/teenager
- ensure that the child/teenager does not have any alcoholic beverages with him/her
- inform the child/teenager of the security instructions and rules onboard
- make sure that silence is observed in the cabin from 11 pm onwards
- make sure that the minor does not take any alcohol

I hereby accept Tallink Silja's instructions for supervisors and accept the responsibility of taking care of the above-mentioned child/teenager.

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|------------------------------------|------|
| SIGNATURE OF THE AUTHORIZED PERSON | DATE |
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The child/teenager must carry this form, appropriately filled in, during the entire voyage in case of possible check-ups.