

	UNACCOMPANIED MINOR CARRIAGE FORM MALDIVIAN GROUND OPERATIONS		Chapter:	IASL/GRH/F002
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			Rev:	0
			Date:	01 Aug 2022

1. UNACCOMPANIED MINORS INFORMATION			
Full Name:			
Date of Birth:		Gender:	
NID/PP no:			
Additional Information (If any)			
2. DETAILS OF PARENT/GUARDIAN OF THE MINOR			
Full Name:			
NID/PP no:		Contact no:	
Relationship to Minor:		Alternate Contact no:	
Address:			
3. FLIGHT INFORMATION			
Flight No	Date	From	To
4. PERSON SENDING THE MINOR AT DEPARTURE			
Full Name:			
NID/PP no:		Contact no:	
Relationship to Minor:		Alternate Contact no:	
Address:			
5. PERSON MEETING AT THE DESTINATION			
Full Name:			
NID/PP no:		Contact no:	
Relationship to Minor:		Alternate Contact no:	
Address:			
6. DECLARATION			
<p>I, the undersigned, hereby declare that the information/s stated in this form is true and accurate. I declare that my child have my permission to travel on this flight. I confirm that I have made arrangements for my child to be met at the arrival destination. Should my child not be met as stated, I authorize Island Aviation Services Limited to take any action they consider necessary to ensure my child's safe custody including returning of my child to the departure airport and to reimburse any and all the costs and expenses incurred by Island Aviation Services Limited in taking such action . I hereby waive any and all claims that I have or may have in the future against Island Aviation Services Limited and voluntarily release, forever discharge and agree to indemnify and hold harmless Island Aviation Services Limited from any claims, expenses and any liability for any loss, damage, expense or personal injury (including emotional or mental damage) as a result of or which is in any way connected with the action.</p>			
Signature		Date	
7. FOR OFFICIAL USE			
Ground staff who received the minor at departure airport	Name & Staff no:	Date	Signature
Cabin crew who received the minor at the aircraft	Name & Staff no:	Date	Signature
Ground staff who received the minor at the arrival airport	Name & Staff no:	Date	Signature
Parent/Guardian who received the minor at the arrival airport	Name	Date	Signature

Original copy – Passenger, 1st copy – Origin, 2nd copy - Destination