**U14**

**AVIATION SECURITY IDENTIFICATION CARD (ASIC)**

**Parent or Guardian consent form for applicants under the age of 14 years**

**ASIC Applicant Details**

|  |  |  |
| --- | --- | --- |
| Surname |  | |
| First Name |  | |
| Other Given Names |  | |
| Company |  | |
| Date of Birth |  | |
| Signature and date |  |  |

**Parent or Guardian Details**

|  |  |  |
| --- | --- | --- |
| Surname |  | |
| First Name |  | |
| Relationship to applicant |  | |
| Consent for under 14 years of age ASIC applicant |  | |
| I confirm I have parental responsibility for the child named in this application and have authority to provide consent on their behalf.  I have read and understood the information provided regarding this ASIC application.  I consent to the child named in the application to undergo a national security assessment for the purpose of this ASIC application. | | |
| Signature and Date |  |  |

**Include this consent form with the Red/Grey or White ASIC application form.**