I AUTHORIZE, NAME ______ STAYS AT WALLABY HOUSE. I ALSO AGREE THAT IF THE ACCOMMODATION FACILITY NEEDS TO CONTACT WITH THE PARENT ABOUT HIS/HER STAY I WILL BE CONTACTED. **[PARENTAL ENTRY FIELD]** PARENTIAL NAME RELATION ADDRESS TEL PARENT SIGNATURE: ____ DATE: _____ **GUEST'S ENTRY FIELD** CHECK-IN DATE CHECK-OUT DATE **GUEST NAME** DATE OF BIRTH / / ADDRESS TEL GUEST'S SIGNATURE: DATE: ____

CONSENT FOR CHILD UNDER 20 YEARS STAYING WITHOUT EITHER PARENT

All guests are required to submit. Please email or fax in advance, or submit to the front desk at check-in. If we cannot confirm the consent of the parent at the time of check-in, we will contact with the parent by telephone on the spot. After confirmation, please submit this consent by email or fax.

The personal information you provide will not be provided or disclosed to any third party without your prior consent.