

FORM 3
PERMIT FOR THE MOVEMENT OF CHILDREN TO TRAVEL TO ANOTHER
PROVINCE/METROPOLITAN AREA/DISTRICT

Regulation 17(1)fcJ

Note: This permit and any form of identification must be in the possession of the person to whom this permit is issued

IN THE MAGISTRATES COURT FOR THE DISTRICT OF PORT ELIZABETH HELD
AT NEW LAW COURTS, DE VILLIERS ROAD, NORTH END, PORT ELIZABETH ON THIS 4TH
DAY OF MAY 2020.

BEFORE ME _____ MAGISTRATE FOR THE
AFOREMENTIONED DISTRICT IN CHAMBERS

I, hereby issue this permit for travel to the following person:

Full names				
Surname				
Identity number				
Address of place of residence				
Province of residence				
Contact details	Cell No		Tel No (h)	
	e-mail address			
Metropolitan area/district travelling to				
Province travelling to				
Date of travel to				
Date of return travel				
Name of child concerned { <i>must correspond with the birth certificate</i> }				
Reason for movement of child(ren)				

I also declare that the above-mentioned person presented the documentation as required by "regulation 17(5)

Signed at PORT ELIZABETH on this the day of 2020

Magistrate issuing

