

Parental Consent Form for Accommodation of Minors

In concluding the hotel reservation of the minor guest below, I, the legal representative (parent or guardian) of the minor, consent to the minor staying at the hotel without being accompanied by their legal representative after I provide sufficient guidance to the minor to ensure that they do not engage in any illegal activities such as drinking alcohol or smoking. Furthermore, I consent to take full responsibility for any damage that they may cause to the hotel or other guests, regardless of whether it was intentional or accidental.

【Minor Guest Details】

Date(YYYY/MM/DD): 2025/8/13

Hotel Name	Hotel Green Mark		
Duration of Stay (YYYY/MM/DD)	From 20 25 / 8 / 15 to 20 25 / 8 / 16		
Guest Name	Jane Green		
Date of Birth (YYYY/MM/DD)	2008/4/15	Age	17
Address	2-6-8Chuo Aouba ward,Sendai,Miyagi,Postcode:980-0021		
Phone Number	022-22X-XX00		

【Legal Representative (Parent or Guardian) Details】

Name of Guardian	John Green	Relationship with Minor
		Father
Address	Same as above	
*Phone Number	090-22XX-XX00	

*The hotel at which the minor will stay may use this number to contact the legal representative in case of any emergencies, or in cases where the legal representative’s confirmation is required for something. Please make sure to enter a number that can easily be reached.

- This consent form must be submitted if minor individuals (under 18 years of age) will be staying at the hotel on their own. In addition, separate consent forms must be submitted for each individual minor who will be staying at the hotel.

- The hotel may refuse the guest’s stay if this consent form is not submitted by the time of check-in on the day of arrival, or if there are any deficiencies in it.

-The personal information you provide in this form will be handled appropriately in accordance with applicable laws and internal regulations. We will not disclose or provide any of this information to third parties except in cases where a disclosure request is made by law enforcement agencies for investigative inquiries.

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Hotel Name			
Duration of Stay (YYYY/MM/DD)	From	20 / /	to 20 / /
Guest Name			
Date of Birth (YYYY/MM/DD)		Age	
Address			
Phone Number			

【Legal Representative (Parent or Guardian) Details】

Name of Guardian		Relationship with Minor
Address		
*Phone Number		

*The hotel at which the minor will stay may use this number to contact the legal representative in case of any emergencies, or in cases where the legal representative’s confirmation is required for something. Please make sure to enter a number that can easily be reached.

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