AUTHORISATION / POWER OF ATTORNEY

I, (applicant's details)
(Parents' details in the case of a minor)

Surname, First Name	
Passport Number/ID number	
Date of Birth	

Hereby authorise (representative's details)

Surname, First Name	
Passport Number / ID Number	
Date of Birth	

- ✓ To submit the visa application at INTERGATE VISALINK.
- ✓ To collect the passport.

Please note that tampering with, or making changes to the original documentation is seen as forging a document.

***Note**

1. No corrections to the Power of Attorney are allowed. The Power of Attorney must be submitted in original.
2. Minors are not allowed to submit third party applications.
3. Should the application for a minor be submitted by an authorised representative, the authority of both custodial parents must be given. The application form must be signed by both custodial parents.
4. Please include a copy of identification (ID / Passport / Driver's License) of the person who is authorised to submit / collect your passport.

_____ _____

DATE SIGNATURE