## Travelling as an Unaccompanied Minor on Qantas

### PREPARING FOR TRAVEL

Please complete all fields marked \* on the form in English, print and bring the printed form to the Airport To make sure you are prepared. Please read the <a href="Children Travelling Alone">Children Travelling Alone</a> information at quantas.com.

### **GOVERNMENT REGULATORY REQUIREMENTS:**

A number of requirements are in place which may impact your child's travel both domestically and/or internationally. Before travel, ensure you check the latest government travel requirements which apply to everyone travelling, including children. Requirements may include passports, visas, travel permits and health declarations.

If you don't comply with these requirements, including seeking the necessary approvals before travel, your child/children could be denied travel or refused entry.

# TRAVELLING WITH MEDICATION (INCLUDING OVER THE COUNTER MEDICATION)

Children travelling alone must be capable of self-administering their medication in order to travel alone. Qantas staff are not generally authorised to administer medication.

### Medication includes:

- Prescription medication from a doctor, dentist or pharmacy such as antibiotics, auto-injectors and inhalers; and
- Over-the-counter medications such as paracetamol, antihistamines, pills and ointments.

Please ensure your child is travelling with a letter/certificate from your child's doctor. For full information please refer to <a href="Children travelling with medication">Children travelling with medication</a>.

DETAILS OF UNACCOMPANIED MINOR 1 お子様1の詳細 (All fields marked with an * are mandatory to be completed)			DETAILS OF UNACCOMPANIED MINOR 2 (IF APPLICABLE)お子様2の詳細 (複数名の場合) (All fields marked with an * are mandatory to be completed)			
* Full name: *氏名			* Full name:			
Male: Female: 女性	Unspecified: 特定せず	* Age: <b>*年齢</b>	Male:	Female:	Unspecified:	* Age:
* Booking Reference: *予約番号			* Booking Refere	nce:		
* Passport Number: (If travelling internationally) *パスポート番号(国際線の場合)			* Passport Number			
* Travelling with medication: (including over the counter medication) *携行するお薬(市販薬を含む)	Yes:	No:	* Travelling with medication: [including over the counter medication] Yes: No:			No:
If yes, please provide details: Yesの場合、詳細			If yes, please prov	vide details:		
* Medical certificate attached: *薬の診断書の添付あり・なし	Yes:	N/A:	* Medical certificate attached: Yes: N/		N/A:	
* Special requirements: (e.g. allergies/dietary) *個別のニーズ(アレルギー・食事)	Yes:	No:	* Special requirements: (e.g. allergies/dietary)  Yes: No:		No:	
If yes, please provide details: [Meals must be ordered 24hrs prior to the flight] Yesの場合詳細(特別食はフライトの24時間前まで)			If yes, please provide details: (Meals must be ordered 24hrs prior to the flight)			
Please note: Athough special meals must be requested 24hours prior to travel, Qantas is unable to guarantee availability. It is suggested that where an unaccompanied minor has specific dietary requirements that a small snack be included in the child's carry-on luggage.						
Any other information to assist Qantas staff with this journey? カンタス航空のスタッフに伝えておきたいその他の情報						

RESPONSIBLE ADULT CONTACT INFOR CHILD (CHILDREN) TO AIRPORT 出	RMATION - PERSON DELIVERING 発空港お見送りの方の情報		
* Full name: *氏名			
* Address: *住所			
* Phone (Mobile/Home): *電話番号(自宅/携帯)	* (Work): *勤務先		
* ID Type: *IDの種類	* ID#: *ID番号		
* Sign at time of drop off: *お見送り時にご署名 いただきます			
STAFF DETAILS (INTERNAL USE ONLY) スタッフ記入欄			
Staff number:	Signature:		

RESPONSIBLE ADULT CONTACT INFOR CHILD (CHILDREN) ON ARRIVAL 到:		
* Full name:		
* Address:		
* Phone (Mobile/Home):	* (Work):	
* ID Type:	* ID#:	
* Sign at time of collection: *お迎え時にご署名いただきます		
STAFF DETAILS (INTERNAL USE ONLY) スタッフ記入欄		
Staff number:	Signature:	



QF-UMNR-V4.0 29052023 Unaccompanied Minor Form

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## Travelling as an Unaccompanied Minor on Qantas

	ALTERNATE EMERGEN	ICY CONTACT (DIFFERENT FROM	I ALL CONTACTS LISTED ON TH	HIS DOCUMENT) 上記連絡先と	は異なる緊急時の連絡先
* Full name: * 氏名					
* Address: * 住所					
* Phone (Mobile/Home): *電話番号(自宅/携帯)			* (Work): <b>*勤務先</b>		
COMPLETE FLIGHT INFO		AS TO RETAIN COMPLETE ights operated by Qantas)	D FORM フライト情報		
Customers to complete this sec	tion (Fields marked with	* are mandatory) お客様記入欄	Customers to complete th	nis section (Fields marked with *	are mandatory)
* Flight no.: * <b>便名</b>	Seat: 座席	* Date: 日時	* Flight no.:	Seat:	* Date:
* From: *出発	* To: *到着		* From:	* To:	
Staff to complete this secti	ion (INTERNAL USE ONLY)	スタッフ記入欄	Staff to complete this s	section (INTERNAL USE ONLY) ス	(タッフ記入欄
Staff name:			Staff name:		
Staff no. :	Port:		Staff no. :	Port:	
Customora to complete this	a acation (Fields mark	ad with * are mandatory)	Customers to complete	a this spotian (Fields marked	with * are mandatory)
Customers to complete this	s section (Fields Mark	ed with * are mandatory)	Customers to complete	e this section (Fields marked	
* Flight no.:	Seat:	* Date:	* Flight no.:	Seat:	* Date:
* From:	* To:		* From:	* To:	
Staff to complete this secti	ion (INTERNAL USE ONLY)		Staff to complete this s	section (INTERNAL USE ONLY)	
Staff name:			Staff name:		
Staff no. :	Port:		Staff no. :	Port:	
PARENT/GUARDIAN DE  1. I confirm the child/child		津上の親または保護者の申告	4. If the child (childre	n) is/are not met at the stope	over point or destination

 I confirm the child/children are eligible to travel as per Qantas age requirements

Domestic All Flights	5-11 years
International Flight time: 6 hours and over	6-11 years
International Flight time: Under 6 hours	5-11 years

- I request that the child/children named in this form be carried as an Unaccompanied Minor by Qantas. I declare that I am responsible in ensuring that my child/children has/have my permission to travel on this flight.
- 3. I confirm that:
  - The person dropping off the child/children will remain at the airport until the flight has departed;
  - The person meeting the child/children at the destination, overnight stop or transfer point will be at the airport by the scheduled flight arrival time and aware of ID requirements.
  - My child/children is/are in possession of all travel documents (passport, e-ticket, visa, health certificate, etc.) required for their journey;
  - I can be contacted at any time without delay while child/children named above is/are in Qantas' care; and
  - I confirm the Unaccompanied Minor/s meets independent travel criteria and feel comfortable and secure travelling alone.

- If the child (children) is/are not met at the stopover point or destination (as applicable):
  - i. I authorise Qantas to take whatever reasonable steps it considers necessary and to notify me or the person specified below of the steps taken, which may mean returning the child (children) to the airport of departure; and I agree to reimburse the carrier for any costs it may reasonably incur in taking such action.
- 5. In the event of a significant delay and/or flight cancellation:
  - I agree to reimburse Qantas for any costs it may reasonably incur in taking such action, in the event that the significant delay or flight cancellation was outside of Qantas' control.
- 6. I understand that:
  - The Qantas Unaccompanied Minor service only applies to flights operated by Qantas; (exception: flight operated by Finnair for Qantas QF291, QF292, QF295 & QF296 and flights operated by Alliance with a QF flight number) and
  - The child/children travel is subject to Qantas' conditions of carriage, Qantas' Unaccompanied Minor Policy and applicable laws, including security screening which may include the use of body scanners.
- I have read, understood and accept all the above points and can confirm that all the information given is true and correct.
- 8. The personal information provided in this form will be used by Qantas for the purposes of handling the travel.

Full name:	Signature:	Date:
Address:		Phone:

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