

**UNACCOMPANIED MINOR PASSENGER**  
(Please read Privacy Act Statement on reverse before completing this form.)

<b>SECTION I. MINOR PASSENGER INFORMATION</b> (PLEASE PRINT)			
1. NAME (Last, First, Middle Initial)	2. NICKNAME	3. AGE	4. SEX <input type="checkbox"/> M <input type="checkbox"/> F
<b>SECTION II. FLIGHT DETAILS</b>			
5. FLIGHT NUMBER	6. SEAT NUMBER	7. DATE (YYYYMMDD)	
8. FROM		9. TO	
<b>SECTION III. PERSON AT DEPARTURE</b>			
10. NAME (Last, First, Middle Initial)		11. STREET ADDRESS	
12. CITY	13. STATE	14. ZIP CODE	
15. RELATIONSHIP TO MINOR	16a. HOME PHONE	16b. WORK PHONE	
<b>DECLARATION</b>			
<p>1. I confirm that I have arranged for the named minor be accompanied to the airport on departure and to be met on arrival by the persons named. These persons will remain at the airport until the flight has departed and/or be available at the airport at the scheduled time of arrival of flight.</p> <p>2. Should the minor not be met as stated on the face hereof, I agree to indemnify and reimburse AMC for any additional expense incurred by them as a result of their inability to relinquish custody.</p> <p>3. In the event of an irregular operation, I authorize AMC to take whatever action they consider necessary to ensure the minor's safe custody including return of minor to the airport of departure.</p> <p>4. I certify that the minor is in possession of all travel documents (passport, visa, health certificate, etc.) required by applicable laws.</p> <p>5. I, the undersigned parent or guardian of the above mentioned minor agree to and request unaccompanied carriage of the minor named above and certify that the information provided is accurate.</p>			
17. SIGNATURE OF PERSON AT DEPARTURE		18. DATE (YYYYMMDD)	
<b>SECTION IV. PERSON AT STOPOVER</b>			
19. NAME (Last, First, Middle Initial)		20. STREET ADDRESS	
21. CITY	22. STATE	23. ZIP CODE	
24. RELATIONSHIP TO MINOR	25a. HOME PHONE	25b. WORK PHONE	
26. SIGNATURE OF PERSON AT STOPOVER		27. DATE (YYYYMMDD)	
<b>SECTION V. PERSON AT DESTINATION</b>			
28. NAME (Last, First, Middle Initial)		29. STREET ADDRESS	
30. CITY	31. STATE	32. ZIP CODE	
33. RELATIONSHIP TO MINOR	34a. HOME PHONE	34b. WORK PHONE	
I certify the information provided is accurate and I accept the conditions of carriage set forth on this form.			
35. SIGNATURE OF PERSON AT DESTINATION		36. DATE (YYYYMMDD)	

**AMC FORM 1004, 19921101 (IMT-V1)**

REPLACES MAC FORM 1004, 19911001, WHICH IS OBSOLETE

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### **About the ITAOP/savePDF Method**

The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

**AUTHORITY:** 10 U.S.C. 8013, Secretary of the Air Force: powers and duties; delegation by.

**PRINCIPAL PURPOSE:** Used to help control the movement and provide for the safety of unaccompanied minor dependents on AMC-owned or controlled aircraft.

**ROUTINE USES:** Records from this system of records may be disclosed for any of the blanket routine uses published by the Air Force. Routinely disclosed to other Federal Agencies and offices providing transportation, and to civilian airlines and airports for transportation services.

**DISCLOSURES:** Disclosure is voluntary. Failure to provide the information may hinder the safe and efficient movement of unaccompanied minors.