



I, the undersigned Mr./Mrs./Ms./Dr. \_\_\_\_\_ holding  
a \_\_\_\_\_ (please insert your Nationality) Passport No.  
\_\_\_\_\_, authorize \_\_\_\_\_

Holding a valid ID # \_\_\_\_\_ to collect  
the passport on my behalf.

Please find below my application reference no.

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please complete the form below.

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

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