

Temporary Guardianship Authorization for Care of Minor

Child

Name: _____

Permanent address: _____

Phone: _____

Birthdate: _____

Child's School or Day Care

[Leave this section blank if your child is not in school or any type of child care program.]

School or child care program: _____ Grade (if in school): ____

Teacher: _____

School address: _____

Phone: _____

Other child care program (such as after-school program): _____

Address: _____

Phone: _____

Responsible adult: _____

Child's Doctor, Dentist, and Insurance

Doctor (or HMO): _____

Address: _____

Phone: _____

Name of medical insurer/health plan: _____ Policy no.: _____

Dentist: _____

Address: _____

Phone: _____

Name of dental insurer/dental plan: _____ Policy no.: _____

Parents (or Legal Guardians)

Parent 1

Name: _____

Address: _____

Home phone: _____ Work phone: _____
Cell phone or pager: _____ Email: _____

Parent 2

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone or pager: _____ Email: _____

Temporary Guardian

Name: _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone or pager: _____ Email: _____

RelRepr: _____

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practice in the United States.

5. This authorization shall cover the period from _____ to _____.
6. While the temporary guardian cares for my child, the costs of my child's upkeep, living expenses, and medical and dental expenses shall be paid as follows:

_____.

I declare under penalty of perjury under the laws of the state of _____ that the foregoing is true and correct.

Parent 1's signature: _____

Date: _____

Parent 2's signature: _____

Date: _____

Consent of Temporary Guardian

I solemnly affirm that I will assume full responsibility for the minor who will live with me during the period designated above. I agree to make necessary decisions and to provide consent for the minor as set forth in the above Authorization and Consent of Parent(s). I also agree to the terms of the costs of the minor's upkeep, living expenses, and medical and dental expenses as set forth in the above Authorization and Consent of Parent(s).

I declare under penalty of perjury under the laws of the state of _____ that the foregoing is true and correct.

Temporary guardian's signature: _____

Date: _____

