

INSTRUCTIONS FOR TEMPORARY GUARDIANSHIP

Temporary Guardianship

Many times, a parent that is raising their children will find instances where they must be away from them. Generally, the parent will leave their child or children in the watch care of a relative or close friend.

This form is provided to facilitate any decisions that need to be made regarding the care of their child or children during the time they are away. The individual named as having the watch care will need to have the original with him/her in case a situation may arise that would need confirmation of his/her authority.

TEMPORARY GUARDIANSHIP AND MEDICAL AUTHORIZATION

I (We) _____ and _____ do hereby appoint and give permission to _____ to act as the temporary legal guardian of the persons of our minor child/children: _____, and _____, and _____, for the purpose of, but not limited to, care, maintenance, custody, control, and education and to seek any medical treatment necessary as may be required by the circumstances. This temporary Guardianship and Medical Authorization shall become effective on the date as set forth hereinafter and shall continue until the same is hereby revoked.

I (We) agree not to hold the above-named individual or individuals liable for any cause of action arising from any oversight, care, medical treatment, or advise given to my dependents.

I (We) have fully read and understand the contents of this document and do hereby freely and voluntary execute the same.

Signed this ____ day of _____, 201__.

STATE OF _____)
County of _____)

On this day personally appeared before me _____ and _____ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this ____ day of _____, 201__.

Notary Public in and for the State of _____
residing at _____