

***CHILD CARE AUTHORIZATION***

I, the undersigned parent, \_\_\_\_\_,  
hereby grant \_\_\_\_\_, the authority to take temporary care of the  
following child(ren): \_\_\_\_\_  
\_\_\_\_\_.

This grant of temporary authority shall begin on \_\_\_\_\_, and shall remain  
effective until terminated by the undersigned.

The above named Caretaker(s) shall have the power to:

- seek appropriate medical treatment or attention on behalf of the child(ren) as may be  
required by the circumstances, including but not limited to, medical doctor and/or hospital  
visits
- authorize medical treatment or medical procedures in an emergency situation

Dated: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_