

Temporary Guardianship Form for Travel

PARENT/GUARDIAN INFORMATION

I/We, the undersigned, being the parent(s)/legal guardian(s) of the minor child named below, hereby grant temporary guardianship for travel purposes to the designated guardian.

Parent/Guardian Name(s): _____

Address: _____

Phone Number: _____

Email: _____

CHILD INFORMATION

Child's Full Name: _____

Date of Birth: _____

Address: _____

Allergies/Medical Conditions: _____

TEMPORARY GUARDIAN INFORMATION

Guardian's Full Name: _____

Relationship to Child: _____

Address: _____

Phone Number: _____

Email: _____

TRAVEL DETAILS

Destination(s): _____

Departure Date: _____ Return Date: _____

Mode of Transportation:

Airplane Train Car Bus Other: _____

Accommodations (Hotel/Relative's Address): _____

Emergency Contact (Not Traveling):

- **Name:** _____
- **Phone Number:** _____

TEMPORARY GUARDIANSHIP AUTHORIZATION

I/We, the undersigned parent(s)/guardian(s), authorize the temporary guardian to:

- Make medical decisions in case of an emergency
- Sign consent for minor medical treatment
- Make travel-related decisions for the child
- Contact authorities in case of an emergency

This authorization is valid from **(Start Date)** _____ to **(End Date)**
_____.

SIGNATURES & NOTARIZATION

Parent/Legal Guardian 1:

Signature: _____ Date: _____

Parent/Legal Guardian 2 (if applicable):

Signature: _____ Date: _____

Temporary Guardian:

Signature: _____ Date: _____

Notary Public (If Required):

Notary Name: _____

Commission Expiry: _____

Seal: _____