

## TEMPORARY GUARDIANSHIP FOR MINORS

To Whom It May Concern:

I, the undersigned, give \_\_\_\_\_ permission to act on my behalf for any guardian matters that may develop in relationship to \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ on the short-term missions' trip sponsored by Poverty Resolutions, Inc.

I authorize \_\_\_\_\_ to make any and all decisions to ensure \_\_\_\_\_'s safety and welfare, including but not limited to decisions regarding medical care.

Signed:

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

STATE OF PENNSYLVANIA

COUNTY OF \_\_\_\_\_

On this, the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me \_\_\_\_\_, the undersigned officer, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name \_\_\_\_\_ subscribed to the within instrument, and acknowledged that \_\_\_\_\_ (he/she/they) executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public

Printed Name: \_\_\_\_\_

My Commission Expires:

\_\_\_\_\_



Awareness. Action. Impact. P.O. Box 421, Furlong, PA 18925 t: 267.544.9094 / e: info@povertyresolutions.org