

Texas Association of Private and Parochial Schools

Authorization and Consent of Legal Guardian

Student Name

Nickname (if any)

- I hereby testify that I have legal custody of the above named child.
- I hereby grant my full permission and consent for the temporary guardian to establish a place of residence for my child, and for my child to reside and travel with the said temporary guardian.
- I hereby grant the temporary guardian my full authorization to make all decisions related to my child's educational, religious and recreational activities and undertakings.
- I hereby grant the temporary guardian my full authorization to administer general first aid treatment for any minor injuries or illnesses experienced by the minor. If the injury or illness is life threatening or in need of emergency treatment, I authorize the temporary guardian to summon any and all professional emergency personnel to attend, transport, and treat the participant and to issue consent for x-rays, anesthesia, blood transfusion, medication, or other medical diagnosis, treatment, or hospital care deemed advisable by, and to be rendered under the general supervision of, any licensed physician, surgeon, dentist, hospital or other medical professional or institution duly licensed to practice in the state in which treatment is to occur.
- This authorization is effective commencing on the ____ day of _____, 20____ and expiring on the ____ day of _____, 20____.
- For the duration that the temporary guardian cares for my child, the costs associated with my child's maintenance, living expenses, medical and dental expenses shall be allocated and paid as follows:
_____.
- Under the penalty of perjury under the laws of the state of _____, I attest to the truthfulness, accuracy, and validity of the foregoing statements.

Parent Name

Parent Signature

STATE OF _____

COUNTY OF _____

SUBSCRIBED and SWORN before me on the ____ day of _____ 20____.

Seal

NOTARY PUBLIC in and for the State of Texas

Printed Name of NOTARY PUBLIC

CONSENT OF TEMPORARY GUARDIAN

I hereby acknowledge the terms set forth above and agree to assume responsibility in accordance with those terms. Under the penalty of perjury under the laws of the state of _____, I attest to the truthfulness, accuracy, and validity of the forgoing statement.

Guardian Name

Guardian Signature

STATE OF _____

COUNTY OF _____

SUBSCRIBED and SWORN before me on the ____ day of _____ 20____.

Seal

NOTARY PUBLIC in and for the State of Texas

Printed Name of NOTARY PUBLIC