

# Temporary Guardianship Authorization

I, \_\_\_\_\_, give \_\_\_\_\_ full authority over my child(ren), \_\_\_\_\_ during the time that I am absent from Spokane Valley Christian Homeschool co-op. The above stated child is under this person's authority in the case of any discipline issues or emergencies

\*on the following date(s) \_\_\_\_\_.  
*(fill in date)*

**OR**

as needed during the \_\_\_\_\_ session.  
*(fill in current session & year)*

Signed and date by BOTH parties below:

\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

*\*This form may be signed by proxy with verbal or electronic authorization*