INSTRUCTIONS FOR FILING DELEGATION OF POWERS

Pursuant to § 26-2A-7, Code of Alabama, 1975, a parent wishing to give consent to another person for the care of their child, for a temporary period of time, must fill out one of these forms and have the document recorded in the office of the Probate Judge.

The Delegation of Powers by Parent or Guardian form is for parent(s) or guardian(s) to complete. Completing and recording this form gives the designated person(s) any power regarding to the consent to the following: Health, support, education, or maintenance of the person or property of the minor child or ward.

- This procedure does not relieve the parent(s) or guardian(s) of legal obligations to the child.

- The form must be signed in front of a notary public before recording in the office of the Judge of Probate. No clerk in this office can assist in the preparation of this form.

- If you do not understand this procedure and do not fill out the forms correctly, it is the suggestion of this office that you seek legal advice in the preparation to insure its accuracy.

THIS DELEGATION IS GOOD FOR ONE (1) YEAR FROM THE DATE OF SIGNING. IF THE DELEGATION IS NEEDED FOR A LONGER PERIOD OF TIME, IT MUST BE RENEWED EVERY YEAR.

IT IS SUGGESTED YOU CHECK WITH THE INSTITUTION OR ORGANIZATION REQUIRING THIS FORM PRIOR TO COMPLETING THIS FORM. THIS DELEGATION IS SUBJECT TO THE RULES AND REGULATIONS OF SCHOOLS, ORGANIZATIONS, MEDICAL AND RECREATIONAL FACILITIES.

Patrick H. Davenport
Judge of Probate
Houston County, Alabama
462 North Oates Street
Dothan, Alabama 36303
DELEGATION OF POWERS BY PARENT(S) OR GUARDIAN(S)

KNOW ALL MEN BY THESE PRESENTS, that in accordance with Section 26-2A-7, Code of Alabama, 1975, we __________________________ (Mother) and __________________________ (Father), the natural parent(s) of _____________________________________, a minor child, whose current age is __________________ and whose date of birth is __________________________, do hereby constitute and appoint __________________________________ and __________________________________, whose address is ____________________________________________, as GUARDIAN(s) of my/our child, __________________________________.

The named guardian(s) shall have any power regarding to the consent of the following: Health, support, education, or maintenance of the person or property of the minor child or ward.

It is my/our intention that the person named above shall have all the powers of the heretofore stated, except the power to consent to marriage or adoption, of said child, for a period not exceeding one year from the date hereof. We further understand that this temporary power of attorney (delegation) of our parental powers does not relieve us of the primary responsibility of our child;

GIVING AND GRANTING unto said person, full power and authority to do, take and perform all and every act and thing whatsoever requisite, proper or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes for the benefit of our child, as we might or could do if personally present, hereby ratifying and confirming all that the said person shall lawfully do or cause to be done by virtue of this power of attorney (delegation of powers) and the rights and powers herein granted;

The above Power of Attorney (Delegation of Powers) of the above named person herein granted shall commence and be in full force and effect on the date set forth below; and such powers shall remain in full force and effect until ONE YEAR from the date set forth below;

IN WITNESS WHEREOF, we have signed this Power of Attorney (Delegation of Powers) on this the ______ day of ______________________________, ___________.

____________________________________
Parent/Guardian

____________________________________
Parent/Guardian

STATE OF ALABAMA
HOUSTON COUNTY
being duly sworn, depose and say that the facts averred in the above acceptance are true according to the best of their knowledge, information and belief;

SWORN TO AND SUBSCRIBED before me this _____ day of ________________, 20__.

_________________________________
Notary Public
My Commission Expires: _______________
ACCEPTANCE OF APPOINTMENT AS GUARDIAN

We, ______________________________________ and _____________________________________, the undersigned, do hereby accept the appointment of GUARDIAN of the person and property of _______________________________________, a minor, age ______, under that certain Delegation of Powers executed by _______________________________________, and _______________________________________, dated the _____ day of ________________________, 20____.

We further certify that we will, in our capacity as GUARDIAN(S), comply with and perform our duties in the best interest of the minor child, all in accordance with SECTION 26-21-7, CODE OF ALABAMA, and the Delegation of Powers hereinabove mentioned.

____________________________
Guardian

____________________________
Guardian

STATE OF ALABAMA
HOUSTON COUNTY

____________________________ and __________________________________
being duly sworn, depose and say that the facts averred in the above acceptance are true according to the best of their knowledge, information and belief;

SWORN TO AND SUBSCRIBED before me this _____ day of ________________________, 20____.

____________________________
Notary Public
My Commission Expires: ______________________