



Proof of Guardianship / Durable Power of Attorney for Care of a Minor

I, _____, state at this time by the laws of my residential state, I am the

- biological parent
- adoptive parent
- court legalized guardian of

_____, born _____
(Resident name) (Date)

in _____,
(City) (State)

I accept responsibility for and have rights to act in his/her behalf. I also acknowledge that Teton Peaks has temporary Durable Power of Attorney of said child, to make decisions including health care, education, discipline, and other decisions reserved to parents under Idaho Code 15-5-104.

Signed: _____ Date: _____

