

Legal Guardianship Consent Form

1. Child Information

Full Name of Child

Date of Birth

Current Address

2. Parent/Legal Guardian Information

Full Name(s)

Relationship to Child

Contact Number

3. Appointed Legal Guardian

Full Name

Relationship to Child

Address

4. Consent

I/We, the undersigned, do hereby consent to appoint the above-named individual as the legal guardian of the minor child identified herein.

Signature of Parent/Legal Guardian

Date

Signature of Appointed Guardian

Date

Witness Name

Signature of Witness

Date
