

**Power of Attorney**  
(Under Michigan Compiled Laws § 700.5103)

I, \_\_\_\_\_, of \_\_\_\_\_,  
*(Printed Name of Parent)* *(City/Town, State/Province, Country)*

do hereby make, constitute and appoint \_\_\_\_\_, of  
*(Printed Name of Appointee)*

\_\_\_\_\_, as my true and lawful attorney in fact for me and  
*(City/Town, State/Province, Country)*

in my name, place and stead. I give unto said attorney full power to do and perform all duties  
which I have as a custodial parent and legal guardian of \_\_\_\_\_,  
*(Printed Name of Minor Child)*

whose date of birth is \_\_\_\_\_, including, but not limited to,  
*(Month/Day/Year)*

making necessary decisions concerning the health (including the authorization of medical  
treatment), education (including enrolling in school), property, custody and general care of said  
child. In accordance with Michigan Compiled Laws § 700.5103, this delegation does not include  
the power to consent to marriage and/or adoption.

This delegation of power will end six (6) months after the date that I affix my signature  
below, unless revoked by me in writing before that date.

\_\_\_\_\_  
*(Signature of Parent)* *(Witness)*

\_\_\_\_\_  
*(Date Signed)* *(Witness)*

*Acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.*

Notary Public \_\_\_\_\_  
\_\_\_\_\_ County  
My Commission Expires: \_\_\_\_\_