Guardianship Letter for Event Attendance

Your Name	Your Address
Your Phone Number	Your Email Address
To Whom It May Concern:	
Re: Temporary Guardianship for _	Your Minor's Full Name
	Your Minor's Full Name
This letter authorizes temporary guard born on to temporary g	lianship of my minor child,guardian
for the purpose of attending the event	guardianlisted below at the Graveyard Mud Bog in Jasper FL.
Details of temporary guardianship:	
• Event Name:	
• Exact Dates:	
• Location: 11637 SE 54 Dr Jas	per FL 32052
Medical consent:	
I,, he	reby grant Temporary Guardian
full authority to act on my behalf in the	e event of a medical emergency during the specified
	orize any necessary medical, dental, or surgical care,
including administering medications, a by a licensed medical professional.	anesthetics, and blood transfusions, as deemed necessary
My child's health information is as follows:	lows:
Known allergies:	
Medications:	
 Medical conditions: 	
Parent/Legal guardian contact information:	rmation: ached at any time during this period using the following
Phone:	Email:
	egal parent or guardian of the aforementioned minor and
Signatur	re of Parent Date