## Limited Power of Attorney for Care and Custody of Minor Child

Pursuant to A.R.S.	§14-5104, I/We	
	· _	[name(s) of legal parent(s)]
hereby convey(s) and dele	gate(s) to	the powers that
		the powers that <i>s</i> ) <i>of power of attorney holder(s)</i> ]
I/we have regarding the ca	re custody and con	trol of my minor child,, [name of minor]
		[name of minor]
for the period of[ma	to y not exceed six (6)	, excluding the power to consent to ) <i>months</i> ]
marriage or adoption of th	e minor.	
State of	)	[signature(s) of legal parent(s)]
State of County of	) ss.	
County of	)	
		ore me by
this day of	, 20	
		Notary Public
		My Commission Expires:

Expiration Date:\_\_\_\_\_