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 delegate(s) to _____ the powers that
[name(s) of power of attorney holder(s)]

I/we have regarding the care, custody and control of my minor child, _____,
[name of minor]

for the period of _____ to _____, excluding the power to consent to
[may not exceed six* (6) *months]

marriage or adoption of the minor.

_____

_____
[signature(s) of legal parent(s)]

State of _____)
) ss.
County of _____)

SUBSCRIBED AND SWORN to before me by _____ this _____ day of _____, 20_____.

_____
Notary Public

My Commission Expires: _____