

**POWER OF ATTORNEY
AND
DESIGNATION OF TEMPORARY
GUARDIAN FOR MINOR CHILD**

We, _____ and _____,
the father and mother of our child, _____ (“our child”),
appoint and authorize _____ to serve as the Guardian of
the person and property of our child at any time neither of us is available to exercise the authority
provided for herein.

If _____ is not able or willing to serve as our child’s Guardian,
we appoint _____ to serve as our child’s Guardian instead.

We hereby authorize the Guardian to exercise any and all rights and responsibilities and
do any and all acts appropriate for a legal Guardian of a minor child including, but not limited to,
the following:

1. **Education**. To enroll our child in the appropriate educational institutions, obtain
access to our child’s academic records, authorize our child’s participation in school activities and
make any and all other decisions related to our child’s education.

2. **Travel**. To make travel arrangements on behalf of our child for destinations both
inside and outside of the United States of America by air and/or ground transportation; to
accompany our child on any such trips; and to make any and all related arrangements on behalf
of my child including, but not limited to, hotel accommodations.

3. **Health Care**. To inspect and disclose any information relating to the physical
and mental health of our child; to make any and all health care decisions; to sign documents,
waivers and releases required by a hospital or physician; to authorize our child’s admission to or
discharge from any hospital or other medical care facility (including transfer to another facility);
to consult with any provider of health care; to consent to the provision, withholding,
modification or withdrawal of any health care procedure; and to make any and all other decisions
related to our child’s health care needs.

The Guardian may exercise any of these powers at any time that neither of us is available
to exercise such authority. Any person may deal with the Guardian in full reliance that this
Power of Attorney and Designation of Temporary Guardian for Minor Child has not been
revoked and that neither of us is available to exercise the authority provided for herein, if the
Guardian submits a written statement to that effect.

**STATEMENT OF ADDITIONAL DESIRES,
SPECIAL PROVISIONS AND LIMITATIONS**

This Power of Attorney and Designation of Temporary Guardian for Minor Child shall not be affected by our disability or incapacity. The authority granted herein shall continue during any period while we may be disabled, incapacitated or unavailable.

We are emotionally and mentally competent to make this Power of Attorney and Designation of Temporary Guardian for Minor Child, and we understand its purpose and effect.

It is our intent and desire that, upon the first to occur of (i) the death of the survivor of the two of us, (ii) such time as both of us, if we both are living, or the survivor of us, if only one of us is living, becomes incapacitated (as such term is defined for purposes of Maryland guardianship law), or (iii) such time as both of us, if we both are living, or the survivor of us, if only one of us is living, is otherwise unavailable to care for our child and consents in writing, before two witnesses, to the appointment of a legal guardian, _____ (or, if he/she is unable to serve, _____) be appointed to serve as the Guardian of our child's person and property, without bond, by the Court having appropriate jurisdiction.

Notwithstanding the foregoing, this Power of Attorney and Designation of Temporary Guardian for Minor Child shall not be construed as a waiver of our parental rights, and we retain the right to revoke this Power of Attorney and Designation of Temporary Guardian for Minor Child at any time.

WITNESS:

Print Name: _____
Date: _____

Print Name: _____
Date: _____

Print Name: _____
Date: _____

Print Name: _____
Date: _____

STATE OF MARYLAND: TO WIT

I hereby certify that on this _____ day of _____, 2009, before me, the subscriber, a Notary Public of the jurisdiction aforesaid, personally appeared _____ and _____ and acknowledged the foregoing Power of Attorney and Designation of Temporary Guardian for Minor Child to be their act and deed.

As witness my hand and notarial seal.

Notary Public
My Commission Expires: _____

ACCEPTANCE OF DESIGNATION AS GUARDIAN FOR MINOR CHILD

I, _____, hereby acknowledge that I have been designated to serve as the Guardian of the person and property of _____ by his/her parents, _____ and _____, pursuant to the foregoing Power of Attorney and Designation of Temporary Guardian for Minor Child. I hereby accept said designation as the Guardian of the person and property of _____ and agree to begin serving in such capacity at any time neither of _____ and _____ is available to exercise the authority provided for therein. **In addition, upon the first to occur of (i) the death of the survivor of _____ and _____, (ii) such time as both of _____ and _____, if both are living, or the survivor of _____ and _____, if only one of them is living, becomes incapacitated (as such term is defined for purposes of Maryland guardianship law), or (iii) such time as both of _____ and _____, if both are living, or the survivor of _____ and _____, if only one of them is living, is otherwise unavailable to care for _____ and consents in writing, before two witnesses, to the appointment of a legal guardian, I agree to serve as the legal Guardian of the person and property of _____.**

WITNESS:

Print Name: _____
Date: _____

Print Name: _____
Date: _____

Print Name: _____
Date: _____