

# KNOW YOUR RIGHTS!

We all have rights in the United States!

## Basic Rights

- Right to remain silent
  - Right to speak with a legal representative
  - Right to see a warrant
- Carry a Know Your Rights card!**

## Rights if Immigration Comes to your Home

- Do not open the door unless ICE has a warrant signed by a judge
- Do not answer any questions. You have the right to remain silent.
- Do not sign anything without consulting a legal representative.

## Family Preparedness

- Gather important documents
- Make plans for who will care for your children
- Register your child's birth with your country's government and apply for a passport for your child
- Update school contacts

## Getting Legal Help

- Only lawyers and accredited representatives can give you legal advice
- Notaries (notarios) are not authorized to give legal advice

## Rights when driving

- Stay in the car and place your hands on steering wheel
- Drivers must provide name and address, but do not need to answer questions about immigration status
- In MA, immigration status is not required to get a driver's license!
- **Never present false documents**

## Rights if Immigration Comes to your Work

- Right to remain silent
- Do not answer any questions or give officials any information about yourself
- You have the right to not line up

## Rights in Detention

- Right to remain silent
- Do not sign anything without consulting a legal representative
- Right to request release on bond.

## More Resources



**MIRA**

MASSACHUSETTS IMMIGRANT AND REFUGEE ADVOCACY COALITION:

## Information on Preventing Immigration Scams

Finding help with an immigration application or case can feel overwhelming! There are many unscrupulous people who offer to help but who are not qualified to provide immigration legal assistance. **Getting the wrong help can hurt!** Make sure you know who can provide legal advice and how to report scams.

### Who can give me advice and represent me in an immigration application or case?



An **attorney (lawyer)** with a valid license to practice law.



An **“accredited representative”** working for a nonprofit organization who has received training and special authorization from the US government to help people with immigration cases. You can look for the organization and the individual on the government’s [listing](#) of accredited representatives.



Notary publics (or “notarios”) are not lawyers in the US and cannot provide legal advice.



Other people like interpreters or tax preparers. Interpreters can help translate important documents sometimes needed for immigration cases and preparers can fill out the form with only the information provided by the applicant, but they cannot provide legal advice.

### How can I find out if the person helping me is a lawyer or accredited representative?

- If the person is an attorney you can ask to see proof that they have an active license. For some states you can also look up their name on the website of the state licensing authority and see if they have been subject to any discipline. In Massachusetts, you can look up an attorney by name on the website of the [Board of Bar Overseers](#). Immigration attorneys with an office in Massachusetts, however, may also be licensed in a different state.
- If the person is an accredited representative you can confirm that they are currently accredited by checking the government’s directory.
- Feel free to ask questions! You can ask if they have represented individuals with similar cases before and what outcomes they have seen, about the timeline for your case, whether they are connected with resources or mentorship if they need it, and anything else you’d like to know!



### What can I expect from my lawyer or accredited representative?

- They should explain the law and any option you may have to help you make decisions about your case.
- Provide you with a written agreement explaining what services they are agreeing to provide and the fee, if any.
- Enter an appearance in the case and sign all the applications they prepare on your behalf
- Provide you a receipt for any payment you've made.
- Give you a full copy of your records, including a complete copy of any documents sent to immigration.
- Provide you with updates about your case, including proof that your application has been submitted, and promptly respond to your calls or emails.

### What should I do if I have been the victim of fraud?

If you have been the victim of fraud, you can make a report. This might help protect others and may also help address your situation. You can make reports to:

- The Massachusetts Attorney General's Office: (617) 963-2917 or [online](#).
- The Massachusetts Board of Bar Overseers: <https://www.massbbo.org/s/complaints>
- The immigration court EOIR Fraud and Abuse Prevention Program: (703) 305-0470 or [EOIR.Fraud.Program@usdoj.gov](mailto:EOIR.Fraud.Program@usdoj.gov)
- The Federal Trade Commission: <https://reportfraud.ftc.gov/#/>

### Where can I find reputable immigration legal services?

- For a directory of legal services in Massachusetts (including immigration) visit [www.masslrf.org](http://www.masslrf.org)
- If you are seeking immigration legal assistance in other states, the Immigration [Advocates Network legal directory](#) provides a fully searchable directory.

# UNITED STATES DISTRICT COURT

for the

In the Matter of the Search of

(Briefly describe the property to be searched  
or identify the person by name and address)

Case No.

This is an example of  
judicial warrant.

A judicial warrant is  
signed by a judge.

## SEARCH AND SEIZURE WARRANT

To: Any authorized law enforcement officer

An application by a federal law enforcement officer or an attorney for the government requests the search of the following person or property located in the \_\_\_\_\_ District of \_\_\_\_\_  
(identify the person or describe the property to be searched and give its location):

I find that the affidavit(s), or any recorded testimony, establish probable cause to search and seize the person or property described above, and that such search will reveal (identify the person or describe the property to be seized):

**YOU ARE COMMANDED** to execute this warrant on or before \_\_\_\_\_ (not to exceed 14 days)

☐ in the daytime 6:00 a.m. to 10:00 p.m. ☐ at any time in the day or night because good cause has been established.

Unless delayed notice is authorized below, you must give a copy of the warrant and a receipt for the property taken to the person from whom, or from whose premises, the property was taken, or leave the copy and receipt at the place where the property was taken.

The officer executing this warrant, or an officer present during the execution of the warrant, must prepare an inventory as required by law and promptly return this warrant and inventory to \_\_\_\_\_  
(United States Magistrate Judge)

☐ Pursuant to 18 U.S.C. § 3103a(b), I find that immediate notification may have an adverse result listed in 18 U.S.C. § 2705 (except for delay of trial), and authorize the officer executing this warrant to delay notice to the person who, or whose property, will be searched or seized (check the appropriate box)

☐ for \_\_\_\_\_ days (not to exceed 30) ☐ until, the facts justifying, the later specific date of \_\_\_\_\_

Date and time issued: \_\_\_\_\_

City and state: \_\_\_\_\_



Judge's signature

Printed name and title

This is an example of a civil immigration warrant.

File No. \_\_\_\_\_

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

**To: Any immigration officer authorized pursuant to sections 236 and 287 of the Immigration and Nationality Act and part 287 of title 8, Code of Federal Regulations, to serve warrants of arrest for immigration violations**

I have determined that there is probable cause to believe that \_\_\_\_\_ is removable from the United States. This determination is based upon:

- ☐ the execution of a charging document to initiate removal proceedings against the subject;
- ☐ the pendency of ongoing removal proceedings against the subject;
- ☐ the failure to establish admissibility subsequent to deferred inspection;
- ☐ biometric confirmation of the subject's identity and a records check of federal databases that affirmatively indicate, by themselves or in addition to other reliable information, that the subject either lacks immigration status or notwithstanding such status is removable under U.S. immigration law; and/or
- ☐ statements made voluntarily by the subject to an immigration officer and/or other reliable evidence that affirmatively indicate the subject either lacks immigration status or notwithstanding such status is removable under U.S. immigration law.

**YOU ARE COMMANDED** to arrest and take into custody for removal proceedings under the Immigration and Nationality Act, the above-named alien.

A civil immigration warrant is not signed by a judge. This warrant alone does not authorize law enforcement to enter your home.

\_\_\_\_\_  
(Signature of Authorized Immigration Officer)

\_\_\_\_\_  
(Printed Name and Title of Authorized Immigration Officer)

#### Certificate of Service

I hereby certify that the Warrant for Arrest of Alien was served by me at \_\_\_\_\_  
(Location)

on \_\_\_\_\_ on \_\_\_\_\_, and the contents of this  
(Name of Alien) (Date of Service)

notice were read to him or her in the \_\_\_\_\_ language.  
(Language)

\_\_\_\_\_  
Name and Signature of Officer

\_\_\_\_\_  
Name or Number of Interpreter (if applicable)

# Immigration Legal Resources<sup>1</sup>

**ACLU of Massachusetts:** For questions about your constitutional rights

- Call 617-482-3170
- Website: [Seek Legal Assistance | ACLU Massachusetts](#)

**Cambridge DeNovo Legal Screening Clinic**

- Call 617-405-5479 and leave your name and contact number
- You will receive a call from a volunteer immigration attorney within a month

**Catholic Charities Immigrant Services**

- Call 617-464-8100
- Website: <https://www.ccab.org/refugee-immigrant-services/>

**Committee for Public Counsel Services:** legal representation for those unable to afford an attorney in all matters in which the law requires the appointment of counsel

- Call 617-482-6212
- Website: [Committee for Public Counsel Services](#)

**Greater Boston Legal Services**

- Call 617-371-1234
- Website: <https://www.gbls.org/get-legal-help>

**Kids In Need of Defense (KIND):** Represents kids under age 17.5 years

- Call: 617-207-4138
- Website: <https://supportkind.org/>

**Lawyers for Civil Rights (LCR) Immigrant Defense Hotline:** legal advice for immigrants facing imminent threats related to immigration enforcement

- Call 617-988-0606 and leave a message
- You will get call back the same day
- Website: [Immigrant Rights](#)

**MA Immigrant and Refugee Advocacy Coalition (MIRA)**

- Website: [Know your rights - MIRA Coalition](#)

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<sup>1</sup> Adapted for the City of Somerville 2.3.2025

**PAIR Project:** Helps with detained immigration cases and asylum

- Call 617-742-9296
- Website: [Get Help – PAIR Project](#)

**Project Citizenship:** For assistance with applying for citizenship

- Call 617-694-5949
- Website: [Citizenship Services](#)

**RIAN Immigrant Center:** legal consultations over the phone to ask questions, receive advice, and learn what immigration options are available

- Call 617-542-7654
- Website: [Immigration Legal Services – Rian Immigrant Center](#)

**Massachusetts Office of the Attorney General:** [Immigration resources/ Civil Rights](#)

- To report the unauthorized practice of law/immigration fraud call 617-963-2917
- To report a hate crime call 1-800-994-3228
- To report bias-motivated threats, harassment or violence submit a report at [Multilingual Combatting Hate PSAs | Mass.gov](#)

### Legal Services Directory in Massachusetts:

- Massachusetts Legal Resource Finder: <https://masslrf.org/en/home>
- Immigration court list of legal services: <https://www.justice.gov/eoir/file/ProBonoMA/download>
- City of Boston free consultations: [City of Boston Immigration Clinic | Massachusetts Legal Resource Finder](#)

### Legal Services Directory Outside of Massachusetts:

- Immigration Advocates Network Legal Directory: [National Immigration Legal Services Directory](#)

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For additional information about your rights and how to prepare yourself and your family, please visit:

[www.somervillema.gov/soia](http://www.somervillema.gov/soia).

If you have questions, please contact the Somerville Office of Immigrant Affairs at [www.somervillema.gov/ContactSOIA](http://www.somervillema.gov/ContactSOIA) or call 311 (617-666-3311).





# SOMER **VIVA**

OFFICE OF  
IMMIGRANT  
AFFAIRS

WE SPEAK YOUR LANGUAGE  
HABLAMOS SU IDIOMA  
FALAMOS A SUA LÍNGUA  
NOU PALE LANG OU  
हामी तपाईंको भाषा बोल्दछौ ।  
我们会说您的语言

The SomerViva: Office of Immigrant Affairs connects immigrant and multilingual neighbors in Somerville with their local government, resources, and information, including:

- City services
- Food and rental assistance
- Small business support
- Legal assistance
- Leadership and engagement opportunities

**Learn more about us or  
make an appointment here:**



[Somervillema.gov/SomerViva](http://Somervillema.gov/SomerViva)

## Contact Us

Make an appointment, follow us on social media, sign up for newsletters and more!

**[www.somervillema.gov/SomerViva](http://www.somervillema.gov/SomerViva)**

### Visit Us

**42 Cross Street, Somerville**

Monday: 8:30 a.m. - 4:30 p.m.

Tuesday: 8:30 a.m. - 4:30 p.m.

Wednesday: 8:30 a.m. - 4:30 p.m.

Thursday: 8:30 a.m. - 7:30 p.m.

Friday: 8:30 a.m. - 12:30 p.m.

### Phone

**(617) 625-6600**

Português: ext. 2123

Español: ext. 2122

Kreyòl: ext. 2622

नेपाली: विस्तारित नं. २६१०

普通话/ 國話、粵語: 分機號碼 2626



# Advice for Immigrant Families

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Materials produced by Massachusetts Law Reform Institute in collaboration with the following organizations: ACLU of Massachusetts, Catholic Charities Archdiocese of Boston, Children's Law Center of Massachusetts, Community Legal Services and Counseling Center, Greater Boston Legal Services, Harvard Immigration and Refugee Clinic, Kids in Need of Defense, Massachusetts Appleseed Center for Law and Justice, Northeast Justice Center, and the Political Asylum/Immigration Representation Project

*Materials available electronically at:*  
<http://www.masslegalhelp.org/immigration/family-emergency>

11/15/2017

# Family Emergency Document List

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## What's included in this packet?

This packet contains information to help your family prepare in case of an emergency, for example in case a parent is detained or deported.

- General Planning and Child Care Plan (2 pages)
  - Talks about how to make an emergency family plan, including how to make plans for childcare.
- Options for Child Care (3 pages)
  - Talks about different options for choosing a person to take care of your children when you can't.
- Know Your Rights and Legal Help (2 pages)
  - Talks about what your rights are with ICE and other law enforcement and where to find legal help.
- Forms
  - Important Document List: a guide of what important documents to collect (1 page)
  - Child's Vital Information: a form to list important information about your child(ren) for the caregiver (2 pages)
  - Caregiver Authorization Affidavit (English/Spanish): a form to give someone the power to make decisions about healthcare and school for your child(ren), which can last up to 2 years (5 pages)
  - Caregiver Authorization Affidavit Sample (4 pages)
  - Temporary Agent Authorization (English/Spanish): a form to give someone the power to make most decisions for your child(ren), which can last up to 60 days (5 pages)
  - Temporary Agent Authorization Sample (4 pages)
  - Referral List: list of free immigration legal services in Massachusetts (2 pages)

# Planning for a Family Emergency

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All families should plan for who will care for your children in an emergency. This packet includes information to help you make a plan with special advice for immigrant families.

## General planning

- **Talk as a family**, about your emergency plan. Include your children. Decide who will take care of the children, where to keep important documents, who to call in an emergency.
- **Gather important documents**: collect important documents like birth certificates and passports. Keep them in a safe place where your family knows where to find them.
- **Know your rights**: Everyone in the U.S. has constitutional rights, learn how they can protect you. Find out your rights and go to a training.
- **Get immigration help**: if immigration is one of your main worries, try to get immigration advice. See a list of free Massachusetts legal services in this packet.



## Child Care Plan

Plan for who will care for your children if you cannot. Talk to your children and the caregiver you choose, so everyone knows the plan and agrees to it. Some steps you can take are:

- **Fill out a caregiver information page for each child**: include important information about your child, like school information, medical information, allergies and medications, and other details that are important to your child's daily life. See the Child's Vital Information Sheet in this packet.
- **Update school contacts**: contact your child's school. Make sure they have the correct contact information for a few people you trust to pick your child up from school in case you cannot.

- Tell the school you want to “opt-out,” or not be included, in any directory information the school puts out. This helps protect your information.
- **You may want to choose someone to care for your child if you cannot:** You can choose from 2 different forms to give someone else the legal responsibility for your child. You do not have to go to court. Both forms are included in this packet.
  - **Caregiver authorization affidavit** gives the caregiver the power and responsibility to make decisions about your child’s education and medical care.
  - **Temporary agent authorization** allows the “agent,” or person you choose, to make any decisions a parent can make for your child for up to 60 days.
- **Register your child’s birth with your foreign consulate:** if either parent is not a U.S. citizen, you may want to register your child’s birth with your consulate. If your child wants to travel or move to your home country, it could be easier if their birth is already registered with the consulate.
- **Apply for passports for your child:** most governments require that both parents give permission for their child to get a passport. If you have sole legal custody you may not need the other parent’s permission.
- **Write a travel letter:** If your child needs to travel outside the U.S., they may need a notarized letter that gives them permission to travel with a trusted adult, or the other parent. You may want to contact an airline or your consulate to get exact instructions.

**This packet has only general information. It is not legal advice. If you have questions about your situation, speak with an Immigration Specialist.**

## Who will take care of my child in an emergency?

Think about these questions when you pick a caregiver for your child:

1. Is the person at least 18 years old? Only an adult can be a caregiver
2. Is the person responsible?
3. Is the person able and willing to care for my child?
4. Does the person have any history with the Department of Children and Families (DCF)?
5. Does the person have any criminal history?

After you pick a caregiver, you need to decide the kind of legal arrangement you will have with them. You have options.

### Informal option

You can always make an informal plan with your family and friends, but this may not be the best option because it does not give the caregiver legal rights. Your plan can include talking to the people you want to care for your child or writing down what you want to happen in an emergency. An informal plan is the easiest, but your child's school or doctor might not follow your plan and the caregiver may have to go to court to help your child.

### Caregiver Affidavit Authorization

A caregiver affidavit authorization is a good option if your main concern is your child's education and health. Many schools and doctors are already familiar with these forms.

The affidavit says who you want to be the caregiver and that your child will live with them. It gives the caregiver the right to make decisions about your child's health care and education for up to **2 years**.

You do not give up any of your rights when you sign it. And you can end the authorization at any time.

The caregiver authorization affidavit only needs the signature of one parent.

You need 2 witnesses to sign the form with you. And you all must sign it in front of a notary.

The caregiver must also sign the affidavit. The caregiver will sign the form and use it whenever the child lives with him or her.

This packet includes a Caregiver Affidavit Authorization form you can use. This form is different from the form you can get from the court. There is space for you to add another caregiver if the one you picked is not available.

**Caregiver Affidavit Authorizations** are useful for any family.

**Temporary Agent Authorizations** are useful if the caregiver needs to make decisions about your child's finances or property.

Give the original form to the caregiver and keep a copy with your important documents.

You do not have to put all your children on one form. You can fill out a form for each child. Each child needs their own form if they have different caregivers.

### **Temporary Agent Authorization**

The temporary agent authorization gives a caregiver more powers than the Caregiver Affidavit Authorization. A Temporary Agent Authorization gives a caregiver the power and responsibility to make more than healthcare and education decisions for your child. A Temporary Agent can also make decisions about your child's property and finances. The person you choose to be the Agent can have any power you do. **But** the Agent cannot give permission for your child to marry or be adopted.

The authorization says you give the agent the power to make decisions in your child's life for up to **60 days** after you are detained or unavailable. You have the right to end the authorization at any time. After 60 days, you can renew the authorization, but you must complete a new form.

If you know where the other parent is and they are able and willing to care for your child, both parents must sign the Temporary Agent Authorization. If the other parent can care for the child, you may not need to fill out this form.

You need 2 witnesses to sign the form with you.

The agent must also sign the authorization.

You can add a second person to the form, in case the person you picked to be Temporary Agent is not available.

This packet includes a Temporary Agent Authorization form you can use. This form is for families who are afraid that immigration enforcement may separate them from their child. If you need an authorization for a different reason, like you are having surgery and you will not be available for a few weeks, the form in this packet is not right for you.

Give the original form to the Agent and keep a copy with your important documents.

You do not have to put all your children on one form. You can fill out a form for each child. Each child needs their own form if they have different caregivers or parents.

### **Guardianship**

A legal guardian has all the rights a parent has to make decisions for your child. Only a court can make someone a guardian, or end a guardianship. Someone that you choose to be a caregiver may need to become a legal guardian in the future if they need to take care of your child for a long time. If you plan for your child to live in the U.S. permanently, with the caregiver, you may want to prepare the guardianship paperwork so it can be filed if needed.

If someone becomes the legal guardian of your child, they have the right to make decisions about your child **instead** of you. If you want to end the guardianship, you will have to ask a judge to end it and the guardian can object. Think carefully before you decide to make someone you're your child's Guardian. You will be giving up your rights as a parent. You can find information about guardianship online (<http://www.mass.gov/courts/selfhelp/guardians/guardian-child.html>) or at the probate and family court closest to you.

### **Advice for Survivors of Domestic Violence**

If you are a survivor of domestic violence the person who abused you may try to take your child. You may need to collect documents that show why your abuser should not get custody. The caregiver you choose may need to go to court if the person who abused you tries to get custody of your child. Talk to your domestic violence counselor if you have one or reach out to a domestic violence program for more information and for safety planning. You can find a list of domestic violence organization here – [http://www.janedoe.org/who\\_we\\_are/members\\_list](http://www.janedoe.org/who_we_are/members_list).

## Know Your Rights and How to Find Legal Help

Every person in the United States has rights. If you are a citizen, or an immigrant, or if you are undocumented – you have rights. The constitution protects everyone. Some of your most important rights are the ones you have when you talk to anyone from law enforcement, including Immigration and Customs Enforcement (ICE).

### What Are My Rights?

- You do not have to talk to an immigration officer (ICE) or answer their questions – you can tell them that you want to stay silent.
- You can ask to talk to a lawyer.
- You can ask if you are free to leave – if the officer says yes, calmly and slowly leave.
- You can refuse to sign anything before talking to a lawyer.
- You do not have to open your door for ICE if they do not have a “warrant.” A warrant is a court order, signed by a judge. If ICE knocks on your door:
  - Ask if they have a warrant, ask them to slide it under the door
  - Check if the information is correct – if your name and address are not correct on the warrant, you can ask them to leave.
  - Check if a judge actually signed the warrant – often ICE uses warrants that are signed by an ICE supervisor. This warrant, does not give ICE permission to come into your house.
- If you are arrested you have the right to call your family, a lawyer, and your consulate.

### Red Cards

Red cards can help you tell an immigration officer that you are using your rights. Show the card to the officer or slide it under the door.

<p>Usted tiene derechos constitucionales.</p> <ul style="list-style-type: none"><li>• <b>NO ABRA LA PUERTA SI UN AGENTE DE SERVICIO DE INMIGRACION ESTA TOCANDO A LA PUERTA</b></li><li>• <b>NO CONTESTE NINGUNA PREGUNTA DEL AGENTE DEL SERVICIO DE INMIGRACION SI EL TRATA DE HABLAR CON USTED.</b> Usted tiene derecho a mantenerse callado. No tiene que dar su nombre al agente. Si está en el trabajo, pregunte al agente si está libre para salir y si el agente dice que sí, váyase. Usted tiene derecho de hablar con un abogado.</li><li>• Entregue esta tarjeta al agente. No abra la puerta!</li></ul>	<p>I do not wish to speak with you, answer your questions, or sign or hand you any documents based on my 5<sup>th</sup> Amendment rights under the United States Constitution.</p> <p>I <b>do not</b> give you permission to enter my home based on my 4<sup>th</sup> Amendment rights under the United States Constitution unless you have a warrant, signed by a judge or magistrate with my name on it that you slide under the door. I do not give you permission to search any of my belongings based on my 4<sup>th</sup> Amendment rights.</p> <p>I choose to exercise my constitutional rights. <i>These cards are available to citizens and noncitizens alike.</i></p>
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### Things to Remember

- Stay calm



- Do not run away
- Do not answer questions
- Do not show fake documents
- Do not sign anything
- Carry your red card and use it
- Ask to speak to a lawyer
- Ask for an interpreter if you are detained or questioned

## More Resources

For more information, look at these websites for know your rights material.

- National Immigrant Law Center: <https://www.nilc.org/get-involved/community-education-resources/know-your-rights/>
- American Civil Liberties Union: <https://www.aclu.org/know-your-rights>
- Immigrant Legal Resource Center: <https://www.ilrc.org/community-resources>
- Immigrant Defense Project: <https://www.immigrantdefenseproject.org/category/resources-for-communities/>

## Finding Legal Help

You may want to talk to an Immigration Specialist. They can help you figure out the best options for you. Be careful of immigration fraud and scams. Check with an organization you trust before you start any immigration process. See a list of free legal service providers.

## Important Documents

Make a file of important documents or copies of important documents. Make sure you, your family, and your caregiver know where to find these documents in case of an emergency.

These are examples of documents (or copies) that you may want to get together:

- ☐ Passports
- ☐ Birth Certificates
- ☐ Marriage License
- ☐ Insurance documents
- ☐ Any family court documents, like guardianship or custody paperwork
- ☐ Any immigration documents (work permit, green card, visa, etc.), especially documents that have your “A” number
- ☐ Driver’s License and/or Other Identification Cards
- ☐ Social Security Card or ITIN number
- ☐ Registry of birth for children
- ☐ Children’s vital information page
- ☐ Emergency Contact Information
- ☐ Caregiver’s Authorization Affidavit
- ☐ Temporary Agent Authorization
- ☐ Any other documents that you think are important

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## Child's Vital Information

This document has important information about your child. It should be given to the person who will take care of your child, or kept with your important documents. You should fill one out for each child.

<b>Child's name</b>	
<b>Date of Birth</b>	
<b>School name and address</b>	
<b>Teacher's name</b>	
<b>Afterschool activities/program information</b>	
<b>Doctor's name</b>	
<b>Doctor's phone number</b>	
<b>Medications</b>	
<b>Allergies</b>	
<b>Medical conditions</b>	
<b>Health insurance</b>	

Family and Emergency Contacts	
<b>Parent 1's Information</b>	Name: Phone Number(s): Address:
<b>Parent 2's Information</b>	Name: Phone Number(s): Address:
<b>Other emergency contact:</b> _____	Name: Phone Number(s): Address: Relationship to child (grandfather, aunt, family friend):
<b>Other emergency contact:</b> _____	Name: Phone Number(s): Address: Relationship to child (grandfather, aunt, family friend):

**Other emergency  
contact:**

\_\_\_\_\_

Name:

Phone Number(s):

Address:

Relationship to child (grandfather, aunt, family friend):

**Any additional  
information or notes  
for the caregiver:**

# CAREGIVER AUTHORIZATION AFFIDAVIT

Massachusetts General Laws Chapter 201F

## 1. AUTHORIZING PARTY (Parent/Guardian/Custodian)

I, \_\_\_\_\_, residing at \_\_\_\_\_  
am the ☐ parent ☐ legal guardian ☐ legal custodian of the minor child(ren) listed below.

I do hereby authorize \_\_\_\_\_, residing at \_\_\_\_\_  
\_\_\_\_\_ to exercise concurrently the rights  
and responsibilities, except those prohibited below, that I possess relative to the education and  
health care of the minor children whose names and dates of birth are:

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

The caregiver may NOT do the following: (If there are any specific acts you do not want the  
caregiver to perform, please state those acts here.)

\_\_\_\_\_  
\_\_\_\_\_

[OPTIONAL – *you can choose an alternate caregiver if you want*] In the event that the  
above-named individual is unavailable or unwilling to serve as the caregiver, I hereby appoint  
\_\_\_\_\_, residing at \_\_\_\_\_,  
as the alternate caregiver.

The following statements are true: *(Please read)*

- There are no court orders in effect that would prohibit me from exercising or conferring the rights and responsibilities that I wish to confer upon the caregiver. *(If you are the legal guardian or custodian, attach the court order appointing you.)*
- I am not using this affidavit to circumvent any state or federal law, for the purposes of attendance at a particular school, or to re-confer rights to a caregiver from whom those rights have been removed by a court of law.
- I confer these rights and responsibilities freely and knowingly in order to provide for the child(ren) and not as a result of pressure, threats or payments by any person or agency.
- I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit.



Upon my unavailability, the named minor children will be deemed to be residing with the named caregiver.

This document shall remain in effect until \_\_\_\_\_ (*not more than two years from the date I sign it*) or until I notify the caregiver in writing that I have amended or revoked it.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Authorizing Party Signature: \_\_\_\_\_  
(parent/guardian/custodian)

Printed name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

2. WITNESSES TO AUTHORIZING PARTY SIGNATURE  
(*To be signed by persons over the age of 18 who are not the designated caregiver*)

\_\_\_\_\_  
Witness #1 Signature

\_\_\_\_\_  
Witness #2 Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Phone Number

3. NOTARIZATION OF AUTHORIZING PARTY'S SIGNATURE

Commonwealth of Massachusetts

\_\_\_\_\_, ss

On this date, \_\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_, proved to me through satisfactory evidence of identification, which was \_\_\_\_\_, to be the person whose name is signed on the preceding document, and swore under the pains and penalties of perjury that the foregoing statements are true.

Signature and seal of notary: \_\_\_\_\_

Printed name of notary: \_\_\_\_\_

My commission expires: \_\_\_\_\_





4. CAREGIVER ACKNOWLEDGMENT *(To be completed and signed by the caregiver)*

I, \_\_\_\_\_, am at least 18 years of age and the above child(ren) will reside with me at \_\_\_\_\_. This document shall take effect when the child(ren) is/are residing with me. My attestation of the residence of the child(ren) shall be sufficient evidence of such and presentation of this signed document constitutes my attestation.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise concurrent rights and responsibilities relative to the education and health care of the child(ren), except those rights and responsibilities prohibited above. However, I may not knowingly make a decision that conflicts with the decision of the child(ren)'s parent, legal guardian or legal custodian.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Signature of caregiver: \_\_\_\_\_

Printed name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

5. ALTERNATE CAREGIVER ACKNOWLEDGMENT *(To be completed and signed by the alternate caregiver, if you choose one)*

I, \_\_\_\_\_, am at least 18 years of age and the above child(ren) will reside with me at \_\_\_\_\_. This document shall take effect when the child(ren) is/are residing with me. My attestation of the residence of the child(ren) shall be sufficient evidence of such and my presentation of this signed document constitutes my attestation.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise concurrent rights and responsibilities relative to the education and health care of the child(ren), except those rights and responsibilities prohibited above. However, I may not knowingly make a decision that conflicts with the decision of the child(ren)'s parent, legal guardian or legal custodian.

I understand that, if the affidavit is amended or revoked, I must provide the amended



affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Signature of alternate caregiver: \_\_\_\_\_

Printed name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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



This document gives someone the right to make school and healthcare decisions for your child(ren).  
It can last for 2 years.

## CAREGIVER AUTHORIZATION AFFIDAVIT

Massachusetts General Laws Chapter 201F

### 1. AUTHORIZING PARTY (Parent/Guardian/Custodian)

I, Parent, residing at 123 Main Street, Boston, MA 01234

am the parent/legal guardian/legal custodian (circle one) of the minor child(ren) listed below.

I do hereby authorize Jessica Jones, residing at 321 Main Street, Boston, MA 04321 to exercise concurrently the rights and responsibilities, except those prohibited below, that I possess relative to the education and health care of the minor children whose names and dates of birth are:

Write the name and address of the person you want to take care of your child(ren). This person is called "the caregiver." This person can make school and medical decisions for your child(ren).

Child #1 01/01/2010  
Name Date of Birth

Child #2 01/01/2007  
Name Date of Birth

Name Date of Birth

Name Date of Birth

The caregiver may NOT do the following: (If there are any specific acts you do not want the caregiver to perform, please state those acts here.)

Write down anything you don't want the caregiver to do.

(for example) the caregiver cannot change my child's school

[**OPTIONAL** – you can choose an alternate caregiver if you want] In the event that the above-named individual is unavailable or unwilling to serve as the caregiver, I hereby appoint John Smith, residing at 1234 Center Street, Boston, MA 01234, as the alternate caregiver.

If the person you pick for the caregiver cannot help, you can pick a second person just in case. Write their name and address here.

The following statements are true: (*Please read*)

- There are no court orders in effect that would prohibit me from exercising or conferring the rights and responsibilities that I wish to confer upon the caregiver. (*If you are the legal guardian or custodian, attach the court order appointing you.*)
- I am not using this affidavit to circumvent any state or federal law, for the purposes of attendance at a particular school, or to re-confer rights to a caregiver from whom those rights have been removed by a court of law.
- I confer these rights and responsibilities freely and knowingly in order to provide for the child(ren) and not as a result of pressure, threats or payments by any person or agency.
- I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit.

What does this mean?

- No court has said you cannot make decisions for your child(ren)
- You are not filling out this form so your child(ren) can go to a different school, or to give rights to a caregiver that a court took away
- No one is forcing you to sign this form
- If you change this form or end the authorization, you will give a new form to everyone who has a copy

Upon my unavailability, the named minor children will be deemed to be residing with the named caregiver.

The caregiver only has rights to make decisions about your child if you are unavailable.

This document shall remain in effect until 01/01/2019 (not more than two years from date of signing) or until I notify the caregiver in writing that I have amended or revoked it.

You decide how long the document is valid – it cannot be for more than 2 years.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Authorizing Party Signature: Parent

**Attention!** You must sign the document in front of a notary public.

Printed name: Parent

Telephone number: 617-555-5555

## 2. WITNESSES TO AUTHORIZING PARTY SIGNATURE

(To be signed by persons over the age of 18 who are not the designated caregiver)

Witness #1  
Witness #1 Signature

Witness #2  
Witness #2 Signature

Witness #1  
Printed Name

Witness #2  
Printed Name

617-555-5556  
Phone Number

617-555-5557  
Phone Number

**Attention!** Two adults have to watch you sign the document and then sign here – you all must sign in front of a notary public. The two adults cannot be the caregiver or the second person you picked to be the caregiver.

## 3. NOTARIZATION OF AUTHORIZING PARTY'S SIGNATURE

Commonwealth of Massachusetts

\_\_\_\_\_, SS

On this date, \_\_\_\_\_, before me, the undersigned notary public, personally appeared, proved to me through satisfactory evidence of identification, which was \_\_\_\_\_, to be the person whose name is signed on the preceding document, and swore under the pains and penalties of perjury that the foregoing statements are true.

Signature and seal of notary: \_\_\_\_\_

Printed name of notary: \_\_\_\_\_

My commission expires: \_\_\_\_\_

You and the two adults have to sign the document in front of a notary public. You have to show ID, like a passport or license, to the notary.

4. CAREGIVER ACKNOWLEDGMENT *(To be completed and signed by the caregiver)*

I, Jessica Jones, am at least 18 years of age and the above child(ren) will reside with me at 123 Main Street, Boston, MA 01234. This document shall take effect when the child is residing with me. My attestation of the residence of the child shall be sufficient evidence of such and presentation of this signed form constitutes my attestation.

Write the caregiver's name and address.

The caregiver knows that this document gives him/her the right to make school and medical decisions for your children, when your children live with him/her. S/he cannot decide something that they know you disagree with. If you change or end the agreement, the caregiver will give copies to everyone.

The caregiver can sign at the same time as you, or at a different time. The caregiver signature does not have to be signed in front of a notary public.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise concurrent rights and responsibilities relative to the education and health care of the child(ren), except those rights and responsibilities prohibited above. However, I may not knowingly make a decision that conflicts with the decision of the child(ren)'s parent, legal guardian or legal custodian.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Signature of caregiver: Jessica Jones

Printed name: Jessica Jones

Telephone Number: 617-555-5558

Date: 06/01/2017

5. ALTERNATE CAREGIVER ACKNOWLEDGMENT (To be completed and signed by the alternate caregiver, if you choose one)

I, John Smith, am at least 18 years of age and the above child(ren) will reside with me at 1234 Center Street, Boston, MA 01234. This document shall take effect when the child is residing with me. My attestation of the residence of the child shall be sufficient evidence of such and my presentation of this signed form constitutes my attestation.

If you choose a backup caregiver, write the person's name and address.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise concurrent rights and responsibilities relative to the education and health care of the child(ren), except those rights and responsibilities prohibited above. However, I may not knowingly make a decision that conflicts with the decision of the child(ren)'s parent, legal guardian or legal custodian.

The backup caretaker knows that this document gives him/her the right to make school and medical decisions for your children, when your children live with him/her. S/he cannot decide something that they know you disagree with. If you change or end the agreement, the caregiver will give copies to everyone.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true, under pains and penalties of perjury.

Signature of caregiver: John Smith

Printed name: John Smith

Telephone Number: 617-555-5559

Date: 06/01/2017

The caregiver can sign at the same time as you, or at a different time. The alternate caregiver signature does not have to be signed in front of a notary public.



# TEMPORARY AGENT APPOINTMENT

Massachusetts General Laws Chapter 190B, § 5-103

## 1. APPOINTING PARTY (Parent/custodian/guardian)

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
am the ☐parent ☐legal guardian ☐legal custodian of the minor child(ren) listed  
below.

I do hereby appoint \_\_\_\_\_, residing at \_\_\_\_\_  
\_\_\_\_\_ as temporary agent to exercise any power  
regarding the care, custody, or property [except the power to consent to marriage or  
adoption and any additional acts prohibited below], that I possess relative to the minor  
child(ren) whose names and dates of birth are:

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

\_\_\_\_\_  
name date of birth

The agent may NOT do the following: *(If there are any specific acts you do not want the  
agent to perform, please state those acts here.)*

\_\_\_\_\_  
\_\_\_\_\_  
[**OPTIONAL** – *you can choose an alternate agent if you want*] In the event that the  
above-named individual is unavailable or unwilling to serve as the agent, I hereby  
appoint \_\_\_\_\_, residing at  
\_\_\_\_\_, as the alternate agent.

The following statements are true: *(Please read)*

- There are no court orders in effect that would prohibit me from exercising or  
conferring the rights and responsibilities that I wish to confer upon the agent. *(If  
you are the guardian or custodian, please attach the court order appointing you.)*
- I confer these rights and responsibilities freely and knowingly in order to provide  
for the child(ren) and not as a result of pressure, threats, or payments by any  
person or agency.
- I understand that, if the affidavit is amended or revoked, I must provide the  
amended affidavit or revocation to all parties to whom I have provided the  
affidavit.



This document shall take effect only if and at such time as I am detained by any law enforcement agency, removed (deported) from the United States, or if my whereabouts is not known to my agent for a 24 hour period. Proof of my detention, deportation, or unavailability may be made by a copy of government document showing my detention or deportation, through the attestation of an attorney on my behalf, or through attestation of my agent.

This document shall remain in effect 60 days after it takes effect or until I notify the agent in writing that I have amended or revoked it.

Check applicable statements:

- ☐ The non-appointing parent has given consent (*See page 4*)
- ☐ I have not attached the non-appointing parent consent because the non-appointing parent is: (*The non-appointing, or other parent, does not have to give permission if one of the following statements is true*)

deceased  
whereabouts unknown  
unwilling to provide care for the minor child  
unable to provide care for the minor child

I hereby affirm that the above statements are true and correct to the best of my knowledge.

Appointing Party Signature: \_\_\_\_\_  
(parent/guardian/custodian)

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

Printed Name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

**2. WITNESSES TO APPOINTING PARTY SIGNATURE**  
(*To be signed by persons over the age of 18 who are not the designated agent.*)

\_\_\_\_\_  
Witness #1 Signature

\_\_\_\_\_  
Witness #2 Signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Address and telephone number

\_\_\_\_\_  
Address and telephone number



3. TEMPORARY AGENT ACKNOWLEDGMENT *(To be signed and completed by the agent)*

I, \_\_\_\_\_, hereby accept this Temporary Agent Appointment.

I am at least 18 years of age.

I understand that I may, without obtaining further consent from a parent, legal custodian, or legal guardian of the child(ren), exercise power relative to the child(ren), except those powers prohibited above.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

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

Printed Name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

4. ALTERNATE TEMPORARY AGENT ACKNOWLEDGMENT *(If you choose an alternate agent, please have complete and sign)*

I, \_\_\_\_\_, hereby accept this Temporary Agent Appointment.

I am at least 18 years of age.

I understand that I may, without obtaining further consent from a parent, legal custodian, or legal guardian of the child(ren), exercise power relative to the child(ren), except those powers prohibited above.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.



I hereby affirm that the above statements are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

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

Printed Name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

5. NONAPPOINTING PARENT CONSENT (*The other parent must give permission if you know where they are and they are willing and able to care for the child*)

I, \_\_\_\_\_, residing at \_\_\_\_\_, am the nonappointing parent of the child(ren). I consent to the designation of \_\_\_\_\_ to be a temporary agent and \_\_\_\_\_ to be the alternate agent (if applicable) for my child(ren). I understand that the temporary agent will have any power regarding the care, custody, or property of the child(ren), [except as stated in Section 1].

Signature: \_\_\_\_\_

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

Printed Name: \_\_\_\_\_

Telephone number: \_\_\_\_\_





This document gives someone the right to make decisions for your child about anything a parent can decide – such as school, healthcare, property, and finances. It can last for up to 60 days.

## TEMPORARY AGENT APPOINTMENT

Massachusetts General Laws Chapter 190B §5-103

### 1. APPOINTING PARTY (Parent/Guardian/Custodian)

I, Parent, residing at 123 Main Street, Boston, MA 01234,

am the ☐ parent ☐ legal guardian ☐ legal custodian of the minor child(ren) listed below.

I do hereby appoint Jessica Jones, residing at 321 Main Street, Boston, MA 04321 as temporary agent to exercise

any power regarding the care, custody, or property [except the power to consent to marriage or adoption and any additional acts prohibited below], that I possess relative to the minor child(ren) whose names and dates of birth are:

Write the name and address of the person you want to take care of your child(ren). This person is called “the agent.” This person can make any decisions for your children that you could make.

Child #1 01/01/2010  
Name Date of Birth

Child #2 01/01/2007  
Name Date of Birth

\_\_\_\_\_  
Name Date of Birth

\_\_\_\_\_  
Name Date of Birth

The agent may NOT do the following: *(If there are any specific acts you do not want the agent to perform, please state those acts here.)*

Write down anything you don’t want the agent to do.

(for example) the agent cannot change my child’s school

[OPTIONAL – you can choose an alternate agent if you want] In the event that the above-named individual is unavailable or unwilling to serve as the agent, I hereby appoint John Smith, residing at 1234 Center Street, Boston, MA 01234, as the alternate agent.

If the person you pick for the agent cannot help, you can pick a second person if you want. Write their name and address here.

The following statements are true: *(Please read)*

- There are no court orders in effect that would prohibit me from exercising or conferring the rights and responsibilities that I wish to confer upon the agent. *(If you are the legal guardian or custodian, attach the court order appointing you.)*
- I am not using this affidavit to circumvent any state or federal law, for the purposes of attendance at a particular school, or to re-confer rights to an agent from whom those rights have been removed by a court of law.
- I confer these rights and responsibilities freely and knowingly in order to provide for the child(ren) and not as a result of pressure, threats or payments by any person or agency.
- I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit.

What does this mean?

- No court has said you cannot make decisions for your child(ren)
- You are not filling out this form so your child(ren) can go to a different school, or to give rights to someone the court took them away from
- No one is forcing you to sign this form
- If you change this form, you will give a new form to everyone who has a copy

Initial each page.

This document shall take effect only if and at such time as I am detained by any law enforcement agency, removed (deported) from the United States, or if my whereabouts is not known to my agent for a 24 hour period. Proof of my detention, deportation, or unavailability may be made by a copy of government document showing my detention or deportation, through the attestation of an attorney on my behalf, or through attestation of my agent.

The agent only has rights to make decisions about your child(ren) if you are arrested, or are missing for 48 hours.

This document shall remain in effect until 60 days from the date it becomes effective, or until I notify the agent in writing that I have amended or revoked it.

This form is only valid starting when you are arrested or missing, and will last for 60 days.

Check applicable statements:

☐ The non-appointing parent has given consent (*See page 4*)

☐ I have not attached the non-appointing parent consent because the non-appointing parent is: (*The non-appointing, or other parent, does not have to give permission if one of the following statements is true*)

You may need to get permission from the other parent. If you do, the other parent will sign section 5.

You may not need permission if one of these statements is true. Check the one that applies.

- ☐ deceased
- ☐ whereabouts unknown
- ☐ unwilling to provide care for the minor child
- ☐ unable to provide care for the minor child

I hereby affirm that the above statements are true and correct to the best of my knowledge.

Appointing Party Signature: Parent

You must sign the document in front of two witnesses.

Printed name: Parent

Telephone number: 617-555-5555

## 2. WITNESSES TO APPOINTING PARTY SIGNATURE

(*To be signed by persons over the age of 18 who are not the designated agent*)

Witness #1  
Witness #1 Signature

Witness #1  
Printed Name

617-555-5551  
Phone Number

Witness #2  
Witness #2 Signature

Witness #2  
Printed Name

617-555-5552  
Phone Number

Two adults have to watch you sign the document and also sign it. Do not sign without your witnesses.

3. TEMPORARY AGENT ACKNOWLEDGMENT (To be signed and completed by the agent)

I, Jessica Jones, hereby accept this Temporary Agent Appointment.

I am at least 18 years of age.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise power relative to the child(ren), except those powers prohibited above.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true and correct to the best of my knowledge.

Signature of agent: Jessica Jones

Printed name: Jessica Jones

Telephone Number: 617-555-5558

Date: 06/01/2017

The agent agrees and understands that rights given to him/her in this form don't begin until you are arrested or missing. If you change or end the agreement, the agent must give copies of the changes to everyone.

The agent can sign at the same time as you, or at a different time.

4. ALTERNATE TEMPORARY AGENT ACKNOWLEDGMENT (If you choose an alternate agent, please have complete and sign)

I, John Smith, hereby accept this Temporary Agent Appointment.

I am at least 18 years of age.

I understand that I may, without obtaining further consent from a parent, legal custodian or legal guardian of the child(ren), exercise power relative to the child(ren), except those powers prohibited above.

I understand that, if the affidavit is amended or revoked, I must provide the amended affidavit or revocation to all parties to whom I have provided this affidavit prior to further exercising any rights or responsibilities under the affidavit.

I hereby affirm that the above statements are true and correct to the best of my knowledge.

Signature of agent: John Smith

Printed name: John Smith

If you choose a backup agent, write his or her name here. The backup agent agrees and understands that rights given to him/her in this form don't begin until you are arrested or missing. If you change or end the agreement, the agent must give copies of the changes to everyone.

The backup agent can sign at the same time as you, or at a different time.

Telephone Number: 617-555-5559

Date: 06/01/2017

5. NONAPPOINTING PARENT CONSENT (if applicable)

I, Parent #2, residing at 123 Massachusetts Street, Boston, MA 01234, am the nonappointing parent of the child(ren). I consent to the designation of \_\_\_\_\_ to be a temporary agent and \_\_\_\_\_ to be an alternate temporary agent for my child(ren). I understand that the temporary agent will have any power regarding the care, custody, or property of the child(ren), [except as stated in Section 1].

If you know where the other parent is, and the other parent could take care of the child, but is not going to, you should put their information here and have them sign.

Signature: Parent #2

Date: 06/01/2017

Printed Name: Parent #2

The other parent also does not have to sign in front of a notary public.

Telephone number: 617-555-5559