Michigan Minor (Child) Power of Attorney (Under Michigan Compiled Laws § 700.5103)

I,(Printed Name of Parent)	, of	ty/Town, State/Province, Country)
do hereby make, constitute and appoint		, of Name of Appointee)
(City/Town, State/Province, Country)	, as my true an	d lawful attorney in fact for me and
in my name, place and stead. I give unto said		
which I have as a custodial parent and legal	guardian of	,
1 5 .		(Printed Name of Minor Child)
whose date of birth is(Month/Da		
(Month/Da	ay/Year)	
making necessary decisions concerning the h	nealth (including t	the authorization of medical
treatment), education (including enrolling in	school), property	c, custody and general care of said
child. In accordance with Michigan Compile	ed Laws § 700.510	03, this delegation does not include
the power to consent to marriage and/or adop	ption.	
This delegation of power will end six	x (6) months after	the date that I affix my signature
below, unless revoked by me in writing before	re that date.	
(Signature of Parent)		(Witness)
(Date Signed)		(Witness)
Acknowledged before me this	day of	, 20
	Notary Publ	ic
		County
	My Commission Expires:	