

Grandparent Temporary Medical Consent for Travel

This document serves as a temporary medical consent and authorization form, granting the designated grandparent(s) the authority to seek and consent to medical treatment for the minor child(ren) named below during travel.

1. Parent or Legal Guardian Information

Full Name of Parent/Guardian:

Street Address:

City, State, Zip:

Telephone Number (Primary):

Telephone Number (Alternative):

2. Authorized Grandparent(s)

Full Name of Grandparent 1:

Full Name of Grandparent 2 (Optional):

Street Address:

City, State, Zip:

Telephone Number:

3. Child(ren) Information

Child 1:

Full Legal Name:

Date of Birth:

Allergies/Medical Conditions:

Current Medications:

Child 2:

Full Legal Name:

Date of Birth:

Allergies/Medical Conditions:

Current Medications:

4. Travel and Authorization Period

This authorization is effective for the travel period starting on and ending on .

Travel Destination(s):

5. Insurance and Medical Provider Information

Health Insurance Company:

Policy/ID Number:

Group Number:

Primary Care Physician:

Physician Phone Number:

6. Authorization and Consent

I, the undersigned parent or legal guardian, hereby authorize the grandparent(s) named in Section 2 to consent to any necessary medical treatment, including but not limited to X-rays, examinations, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care, to be rendered to the minor child(ren) under the general or special supervision and on the advice of any physician, surgeon, or dentist licensed to practice. This authorization is granted only for the duration of the travel period specified in Section 4.

Parent/Guardian Signature:

Date:

7. Notary Acknowledgment

(For use by a licensed notary public, if required for travel)

State of:

County of:

On this day of , 20, before me personally appeared , known to me to be the person who executed the within instrument and acknowledged that they executed the same.

Notary Public Signature:

My Commission Expires: