INSTRUCTIONS

Massachusetts Temporary Agent Authorization Form

Who can use this form?
If you are the parent, legal custodian, or legal guardian of a child or children, you can appoint a temporary agent who will have the power to make decisions for the child(ren) for a period not longer than 60 days. This can be very useful if you anticipate being temporarily unable to care for the child(ren) because of illness, employment, or travel and the child(ren) will be in the care of another adult.

Do I need to file anything in court if we use this form?
No. This form gives the agent the power to make decisions without a court order.

What does the temporary agent do with this form?
You or the agent will need to give a copy of this form to the child(ren)’s school, doctor, and anyone else who requires the signature of the child(ren)’s guardian. You should keep a list of everyone to whom you gave the form, in case you have to let them know about changes. You should make copies for yourself, and keep the original in a safe place.

What powers does the temporary agent have?
Generally, the temporary agent will have any powers that you, the parent, legal custodian, or legal guardian, have regarding the care, custody, and property of the child(ren). The
temporary guardian never has the power to consent to the marriage or the adoption of a minor. Further, you can specify additional powers that you do not want the agent to have. The authority of the agent can be altered or limited by the court.

**If a parent signs this form, can the parent still make these decisions?**

Yes, a parent keeps the right to make these decisions as well.

**What happens if the agent and the parent disagree?**

If there is a disagreement, the parent makes the final decision.

**How long does this permission last?**

It lasts for up to 60 days. You will need a new one every 60 days.

**Can a parent change his or her mind?**

Yes. He or she needs to write a letter to the agent, saying that the agent no longer has permission to make these decisions. Please be sure to sign the letter and include the date. The parent or the agent gives a copy of this letter to the child’s school, doctor, and anyone else who received a copy of this affidavit.

**Do I need the permission of the child(ren)’s other parent?**

If the whereabouts of the child(ren)’s other parent are known, and the other parent is willing and able to provide care and custody for the child(ren), then you do need to get the other parent’s written consent. This can be done by having that parent fill out Section 5 of this form. If you don’t know where the other parent lives, or if that parent is unable to care for the child(ren) for any reason (ex. incarceration, poor health, or mental illness), you need not obtain that parent’s signature.
HOW TO FILL OUT THE FORM

Parent/custodian/guardian

- Fills out Section 1, called “Authorizing Party”

- Sign this form in front of two witnesses (who are not the agent) and a notary public. Have the witnesses and notary sign Sections 2 and 3, called “Witnesses” and “Notarization,” respectively.

- Notaries are often available at banks and courts. You can also find a notary in the yellow pages. Please note that you will need to show a picture I.D. to the notary. There may be a fee to have the form notarized.

Temporary Agent

- The agent fills out Section 4, called “Temporary Agent Acknowledgement.”

Nonappointing Parent

- The nonappointing parent fills out Section 5, called “Nonappointing Parent Consent.”

Both the parent/custodian/guardian and the agent should carefully read the form before signing, because you are swearing that the information in it is true.
TEMPORARY AGENT AFFIDAVIT
Massachusetts General Laws Chapter 190B, § 5-103

1. AUTHORIZING PARTY (Parent/custodian/guardian)

I, ___________________________, residing at ________________________________, am the: (circle one) parent legal guardian legal custodian of the minor child(ren) listen below.
I do hereby appoint ____________________________, residing at _______________________________, to exercise concurrently 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:

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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.)

________________________________________________________________________
________________________________________________________________________

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 remain in effect until ____________ (not more than 60 days from today) or until I notify the agent in writing that I have amended or revoked it.
I hereby affirm that the above statements are true, under pains and penalties of perjury.

Signature: ___________________________  Date: ________________

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 agent.)

_____________________________  ______________________________
Witness #1 Signature          Witness #2 Signature

_____________________________  ______________________________
Printed name                  Printed name

_____________________________  ______________________________
Address and telephone number  Address and telephone 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. TEMPORARY AGENT ACKNOWLEDGMENT
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 concurrent power relative to the child(ren), except those powers 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: ___________________________ Date: ________________
Printed Name: _________________________
Telephone number: _____________________

5. **NONAPPOINTING PARENT CONSENT (if applicable)**

I, ___________________________, residing at ________________________________, am the nonappointing parent of the child(ren). I consent to the designation of ___________________________ to be a 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].

Signature: ___________________________ Date: ________________
Printed Name: _________________________
Telephone number: _____________________