**Youth Guardianship Form**

For children **not** your own and attending General Assembly

**INSTRUCTIONS FOR THIS FORM:**

**The parent/legal guardian must take the first page to a notary and have their signature notarized. Many banks offer their customers notary services for free, check with your bank to see if you can get this service there. The sponsor must carry the form with them during travel and during GA week in case of an emergency.**

General Assembly is not a youth conference. The UUA does not provide adult supervision outside of formally designated group experiences. Adult sponsors are responsible for youth under 18, and GA recommends youth have an adult present, able to act as legal guardians.

If you bring youth to General Assembly (“GA”) for whom you are not the permanent legal guardian, this form must be signed by the youth’s parent/legal guardian and the youth’s temporary legal guardian for GA (called “GA guardian” in this document. It must be notarized to be legal and effective. The adult sponsor should carry this form in case of a need to act as GA guardian.

Name of Parent/Legal Guardian (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I do hereby authorize (name of GA guardian, printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to give permission for medical or surgical treatment and otherwise act as GA guardian for my child listed below.

This temporary GA guardianship is in effect during these dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth’s Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**NOTARY**

Subscribed and sworn before me this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_

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

**GA GUARDIAN**

I agree to serve as GA guardian at General Assembly for the child listed above. By signing, I understand that:

* When this youth is not in an GA program that provides adult supervision, I am responsible for the youth’s health, well-being, safety, and good behavior at GA.
* That if this youth fails to follow GA rules, the youth may have to remain with me during the remainder of GA and that continued failure to follow rules may result in the youth being asked to leave GA.

GA Guardian Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GA Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Relationship with youth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note: You must be 25 or older to be a GA guardian**