Buckaroo Rodeo Bible Camp



Temporary Guardianship Agreement

,		, of		
	(print your full name)		(address)	
			as the custodial parent of:	
	(city, state, zip)			
List the ful	l names of each child	List e	ach child's birth date	
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D. II.			tore destrutions and	
Do nereby g	grant temporary guardians	nip of the above	isted children to:	
List the ful	ll name of the individual to	whom Liste	ach person's relationship to the	
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hereby grant permission for any and all medical and/or dental attention to be administered to my child/children, in the event of an accidental injury or illness. This permission includes, but is not limited to, the administration of first aid, and the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel.

Signature:	Date:

Buckaroo Rodeo Bible Camp PO Box 755 Pendleton, OR 97801 www.buckaroosforchrist.com