



5102 S. Commerce Drive ■ Murray, Utah 84107  
(801) 264-7400 ■ (801) 264-7456 (fax)

## Durable Power of Attorney

The undersigned Grantor(s) are the custodial parent or legal guardian of \_\_\_\_\_, **DOB** \_\_\_\_\_). Pursuant to *Utah Code Annotated*, §53A-2-201(3), Grantor(s) hereby designates \_\_\_\_\_ as the Custodian(s) of said minor child, and grant to said Custodian(s) a Durable Power of Attorney will full authority to take any action which said Custodian(s) may deem necessary to protect or further said child’s health and welfare, including authorization for educational or medical services. Such action shall have the same force and effect, and shall bind the undersigned Grantor(s), their heirs and assigns, to the same degree, as would have been the case had the action been taken by the Grantor(s).

If said minor child attends a Utah public school or school district, Grantor(s) agree to assume full responsibility for payment of any fees or charges relating to the child’s education in the district. If payment of fees would be a hardship and application should be made for fee waivers, Grantor(s) also agrees to provide all financial information requested by the school district in determining eligibility for waivers.

This durable Power of Attorney shall not be affected by the disability of the designated custodian and shall remain in effect until the earliest of the following:

- a. The child reaches the age of 18, marries, or is emancipated;
- b. The following date: **June 30, 2025**;
- c. Revocation of this Durable Power of Attorney by the Grantor(s), the Custodian(s), or a court of law.

**GRANTOR(S):**

\_\_\_\_\_

STATE OF UTAH )  
 )  
 ) :ss  
COUNTY OF SALT LAKE )

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, personally appeared before me \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed, and acknowledged to me that he/she signed it voluntarily for its stated purpose.

\_\_\_\_\_  
Notary Public

**ACCEPTANCE OF DURABLE POWER OF ATTORNEY**

The undersigned accepts the designation as Custodian(s) of \_\_\_\_\_  
(DOB \_\_\_\_\_), a minor child, and agrees to take all actions necessary for the health and welfare of said child, including full cooperation with public school authorities in any public school or school district where said child may be enrolled. The undersigned also agrees to assume responsibility for any fees or other charges relating to the child's education in the district and, if application is made for fee waivers, will provide all financial information requested by the district for purposes of determining eligibility for fee waivers.

**CUSTODIAN(S):**

\_\_\_\_\_

STATE OF UTAH                                 )  
  :ss.  
COUNTY OF SALT LAKE                     )

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, personally appeared before me \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed, and acknowledged to me that he/she signed it voluntarily for its stated purpose.

\_\_\_\_\_  
Notary Public