REVOCATION OF PARENT-GUARDIAN AFFIDAVIT

I hereby revoke (withdraw) the delegation of parental/guardian powers over these minor child/ren of mine:

(check one)

(check one)

(Date of Birth)

(Full Name of Minor Child)

(Full Name of Minor Child)

(Full Name of Minor Child)

that was granted to_____

(Full Name of Parent Appointed Guardian)

on the following date ______. That delegation is now revoked.

By _____ Today's date: _____ (Parent/Legal Guardian Signature)

(Date if Birth)

(Date of Birth)