ASSIGNMENT OF TEMPORARY GUARDIANSHIP
for the 2025-2026 school year.

The Parent and Guardian must complete and sign this form.
A copy of this document will be kept on file at the Idalia School District RJ-3 office.

PART I: PARENT/LEGAL GUARDIAN

_____
Parent Name

_____
Phone Number

PART II: TEMPORARY GUARDIAN

_____
Temporary Guardian Name

_____
Phone Number

Part III: Name of Minor Child(ren)

Please list all children that apply.

_____ _____

_____ _____

PART IV: TEMPORARY ASSIGNMENT OF GUARDIANSHIP

I, _____, hereby authorize _____,
Parent's Name Guardian's Name
to serve as the guardian to my child, _____.
Minor's Name

I understand and acknowledge that the above named individual shall be responsible for my child. I further release, waive and discharge the Idalia School District RJ-3. the organizers of any event. the trustees of, officers of. agents of, or employees of the Idalia School District RJ-3 or any owner or lessor of any property on which the Idalia School District RJ-3 conducts any activity, from and covenant not to sue them for any and all liability to my child, myself. or any party claiming an interest through myself or my child, for any and all loss or damage or demand therefore on account of injury to the person or property or death of my child. whether or not caused by their negligence or for any other reason.while preparing for, traveling to or from, or participation in any Idalia School District RJ-3 event.
I further agree to defend. indemnify and hold harmless the parties released above. and each of them. from damage to any property whether belonging to my child or others, or the presence of or my child's actions during any Idalia School District RJ-3 event. whether or not caused by their negligence or for any reason.

_____ _____ _____
Parent's Signature Printed Name Date

I, _____, accept the responsibilities of acting guardian for _____
Guardian's Name Minor's Name

_____ _____ _____
Guardian's Signature Printed Name Date