

Conditional Guardianship Declaration

I, [REDACTED], born on [REDACTED], residing at [REDACTED], hereby declare this Conditional Guardianship of my minor child(ren): [REDACTED]

Child(ren)'s Name(s): [REDACTED]

Date of Birth: [REDACTED]

Appointed Guardian

Name of Guardian: [REDACTED]

Address: [REDACTED]

Conditions of Guardianship

This guardianship shall take effect only under the following condition(s):

[REDACTED]

Duration of Guardianship

This guardianship shall remain in effect until:

[REDACTED]

Signature

Parent/Legal Guardian's Signature: [REDACTED]

Date: [REDACTED]

Witness

Witness Name: [REDACTED]

Address: [REDACTED]

Signature: [REDACTED]

Date: [REDACTED]