

STATE OF NEW MEXICO  
COUNTY OF \_\_\_\_\_

**POWER OF ATTORNEY**

I, \_\_\_\_\_, residing in \_\_\_\_\_ New Mexico,  
*Parent* *City*

Mother  Father of \_\_\_\_\_ and pursuant to 45-5-104 NMSA,  
*Name of Child*

do hereby appoint \_\_\_\_\_ of \_\_\_\_\_ New Mexico,  
*Caregiver* *City*

my true and lawful attorney in fact, to act in my name, place and stead, in the event that I  
am unavailable and a decision must be made and/or authorization given for my child,

\_\_\_\_\_, regarding the following (check all  below with an (x) that apply):  
*Name of Child*

- |  |   |
|--|---|
| <input type="checkbox"/> custody;                                  | <input type="checkbox"/> medical treatment and care;            |
| <input type="checkbox"/> education matters;                        | <input type="checkbox"/> participation in religious activities; |
| <input type="checkbox"/> participation in recreational activities; | <input type="checkbox"/> in any other matters;                  |

I authorize \_\_\_\_\_ in this event to take any and all steps, as fully and  
*caregiver*  
for all intents and purposes as I might do or could do if personally present. I understand  
that pursuant to the statute, this Power of Attorney **terminates six (6) months** from the  
date executed and I may renew it at that time.

IN WITNESS WHEREOF, I set my hand and seal this \_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Signature (must be signed in front of a notary)

SIGNED AND SWORN before me on  
this \_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My Commission Expires : \_\_\_\_\_