## STATE OF ALABAMA

**COUNTY OF SHELBY** 

## CHILD CARE AUTHORIZATION

I, the undersigned parent, Rebeccah Suzanne Hazen, of 45 Cherokee Trail, Indian Springs, Alabama 35124, hereby grant Rhonda M. Hazen, of 45 Cherokee Trail, Indian Springs, Alabama 35124, the authority to take temporary care of the following child: Suzanne Rebeccah Hazen, 419-17-3614. This grant of temporary authority shall begin on May 31, 2000, and shall remain effective through August 01, 2004.

The above named Caretaker(s) shall have the power to:

- seek appropriate medical treatment or attention on behalf of the child as may be required by the circumstances, including but not limited to, medical doctor and/or hospital visits;
- authorize medical treatment or medical procedures in an emergency situation;
- make appropriate decisions regarding clothing, education, employment, bodily nourishment and shelter;
- enter into any legal contract or take any action whatsoever is necessary to care for Suzanne Rebeccah Hazen and on behalf of Suzanne Rebeccah Hazen.

Rebeccah Suzanne Hazen

WITNESS: