



ABC  
Address  
Date

XYZ  
Address

To whom it may concern,

I, Mary Clark, mother of Lily Clark, age 2, authorize XYZ to perform any acts that are necessary to ensure the health of my child while I am away and she is under Julie's care. This includes any doctor/hospital visits, medicine, vaccines, or surgeries. Lily's medical record number is 12334556. This authorization shall be valid between the dates of February 20, 2013 to March 1, 2013.

Thank you for your assistance in this matter.  
Sincerely,  
Mary Clark