**The Family Court of the State of Delaware**

In and For [ ]  New Castle County [ ]  Kent County [ ]  Sussex County

## STANDBY GUARDIANSHIP

## AFFIDAVIT OF CONSENT OF CHILD 14 YEARS OF AGE OR OLDER

*Petitioner Respondent*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Name |  |  Name |  | File Number |
|       |  |       |  |  |
|  Street Address (including Apt)  |  |  Street Address (including Apt)  |  |       |
|       |  |       |  |  |
|  P.O. Box Number |  |  P.O. Box Number |  | Petition Number |
|       |  |       |  |  |
|  City/State/Zip Code State Zip Code |  |  City/State/Zip Code |  |       |
|        |  |        |  |  |
|  Date of Birth |  | Date Date of Birth |
|       |  |       |

*2nd Petitioner (if any) 2nd Respondent (if any)*

|  |  |  |  |
| --- | --- | --- | --- |
|  Name |  |  Name |  |
|       |  |       |  |
|  Street Address (including Apt)   |  |  Street Address (including Apt)  |  |
|       |  |       |  |
|  P.O. Box Number |  |  P.O. Box Number |  |
|       |  |       |  |
|  City/State/Zip Code |  |  City/State/Zip Code |  |
|       |  |       |  |
|  Date of Birth |  |  Date of Birth |  |
|       |  |       |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  BE IT REMEMBERED, that  |       | , (“Child”), on this date  |        |

being duly sworn by me according to the law, personally appeared before me, a Notary Public for the State and County declared above, did depose and say:

|  |  |  |
| --- | --- | --- |
|  1) I hereby agree that  |       | shall be my standby guardian(s) |
|  2) I understand that as my standby guardian(s),  |       |
|  shall protect, manage and care for me as a parent would and they shall make decisions regarding my |
|  care upon the occurrence of my parent(s)/ guardian(s) death, incapacity, or debilitation. |

|  |  |  |
| --- | --- | --- |
| SWORN TO AND SUBSCRIBED |  |  |
| before me this date, |  |  |
|  |  |  |
|       |  |       |
|  |  | Affiant |
|  |  |  |
| Notary Public/Clerk of Court |  |  |