CERTIFICATE OF ACCEPTANCE AS GUARDIAN OR ESCORT For use of this form, see AR 600-20; the proponent agency is DCS, G-1.						
PRIVACY ACT STATEMENT						
AUTHORITY:	<b>THORITY:</b> 10 U.S.C. Section 3013, Secretary of the Army: Army Regulation 600-20, Army Command Policy.					
PRINCIPAL PURPOSE: Guardian's agreement to care for a soldier's child(ren) in his or her absence.						
ROUTINE USES:	None.					
DISCLOSURE:	Voluntary; However, failure to provide all the requested information could lead to rejection of a soldier's Family Care Plan.					
I was provided an original DA Form 5841						
(Power of Attorney) or other legally sufficient authority naming me as guardian/escort for:						
NAME (s) / AGE (s) OF FAMILY MEMBERS						
family members of: NAME (s)						
I agree to accept responsibility for these family members. I have received all necessary documents required to provide financial, medical, educational, quarters, and subsistence support for these family members. I have been briefed on procedures for accessing military/civilian facilities, services, benefits, and entitlements on behalf of these family members.						
TYPED OR PRINTED N		members.		ADDRESS (Include ZIP Code)		
SIGNATURE		DATE (YYYY/M	M/DD)			
TELEPHONE NUMBER	(Include Area Code)		E-MAIL	ADDRESS		
NOTARY:						
STATE OF						
COUNTY OF						
Acknowledged before me this day of,						
(Notary Public)						
My commission expires:						
DA FORM 5840, JUN 2010 PREVIOUS EDITIONS ARE OBSOLETE.					APD LC v1.00ES	