

Instrument Appointing Enduring Guardian(s) For Tasmania

Write your name, address, occupation and date of birth here.

Occupation examples:
Carpenter, Retiree,
Home duties

Write your guardian details here.

If you only want to appoint one person as your guardian, complete this section, then go to Section 3. If you want to appoint joint guardians, write the first guardian's details here.

If you want to appoint **joint guardians**, write the second person's details here. See the info sheet for more information on joint guardians

Optional section

If you want to appoint an **alternative guardian in case one of your guardians cannot assume the role.**

Write your alternative guardian's details here. If you do not wish to appoint an alternative guardian, go to Section 4 now.

Section 1: Your Details

I, (your full name): _____

Of (your address): _____

Telephone: _____

Date of Birth: _____

Occupation: _____

Section 2: Choosing your guardian(s)

Appoint (guardian's name): _____

Of (guardian's address): _____

Telephone: _____

Guardian's Occupation: _____

to be my guardian.

Optional Section

I also appoint (joint guardian's name): _____

Of (joint guardian's address): _____

Telephone: _____

Joint Guardian's Occupation: _____

to by my guardian.

Section 3: Choose your Alternative Guardian (Optional)

In the event that my guardian (or one of my joint guardians) becomes incapable or unavailable to exercise this appointment, I appoint:

(Alternative guardian's name): _____

Of (alternative guardian's address): _____

Telephone: _____

Alternative Guardian's Occupation: _____

Optional section:

If you need more space,
add a separate sheet and
sign and date it at the
bottom of the page.

Subject to any Advance Care Directive you have made, if you do not impose any conditions, a guardian will have **full powers** should you lose capacity.

If you have made an Advance Care Directive (ACD), you can provide details of the ACD here. The provisions of the ACD will take precedence over this instrument if there is any inconsistency.

I require my guardian to observe the following conditions in exercising, or, in relation to the exercise of, the powers conferred by this instrument:

[illegible]

ACD registration number: _____

Section 6: Signatures

This is an appointment of an enduring guardian made under Part 5 of the *Guardianship and Administration Act 1995*. I acknowledge that this is a public document and is available for public scrutiny.

Signed: _____

Date: _____

As witnesses we certify that: (a) the person has signed this instrument freely and voluntarily in our presence; and

(b) the person appears to understand the effect of this instrument.

Signature of Witness 1

Signed: _____

Name: _____

Address: _____

Occupation: _____

Signature of Witness 2

Signed: _____

Name: _____

Address: _____

Occupation: _____

You sign here, but before you sign, you must arrange for two witnesses to watch you sign this form.

The witnesses cannot be related to you or your guardian(s), or be people whom you have named as guardian(s).

Your first witness signs here, and writes their full name and address.

Your second witness signs here, and writes their full name and address.

Your first guardian writes their full name and signs here to say they accept the appointment as your guardian and have obtained and understood any Advance Care Directive you have given. This should be the person whose name you wrote on the first part of Section 2. They do not need a witness for their signature.

If you have appointed **two joint guardians** who must act together, your joint guardian writes their full name and signs here. They do not need a witness for their signature.

If you have appointed an alternative guardian in case your first guardian cannot assume the role, your alternative guardian signs here. They do not need a witness for their signature.

I, (guardian's name): _____

accept appointment as guardian under this instrument, declare that I have obtained and understood any **Advance Care Directive** given by my appointor and undertake to exercise the powers conferred honestly and in accordance with the provision of the *Guardianship and Administration Act 1995*.

Signed: _____

I, (joint guardian's name): _____

accept appointment as guardian under this instrument, declare that I have obtained and understood any **Advance Care Directive** given by my appointor and undertake to exercise the powers conferred honestly and in accordance with the provision of the *Guardianship and Administration Act 1995*.

Signed: _____

I, (alternative guardian's name): _____

accept appointment as guardian under this instrument, declare that I have obtained and understood any **Advance Care Directive** given by my appointor and undertake to exercise the powers conferred honestly and in accordance with the provision of the *Guardianship and Administration Act 1995*.

Signed: _____

How to Register this Form

- Step 1: Ensure you have signed the form in front of two witnesses who must also sign the document. The proposed guardians must also sign the document.
- Step 2: Complete the Enduring Guardian Coversheet.
- Step 3: Lodge this form and the coversheet at any Service Tasmania Shop with the registration fee or apply for a waiver of the fee on grounds of financial hardship.
- Step 4: The Tribunal will register the document and send you copies for yourself, your enduring guardian and your family doctor. You may wish to make extra copies for other members of your family, hospitals and your lawyer. If a law firm has submitted your documents, copies will be returned to the law firm.

Note: This document is not legally binding unless it is registered.