***Welcome to Family Konnections!!***

My goal is to strengthen family relationships through Visitation, Exchange and Support Services and provide a child focused environment for families in transition. I previously held a position as Case Manager with the YWCA of Silicon Valley in San Jose for over 3 years handling Supervised Visitations and Exchanges prior to establishing Family Konnections Supervised Visitation & Exchange Agency in Nov. 2010. I established Family Konnections in Georgia in 2018

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My services are established by mutual consent from both parties or by Court Order but will only be successful with the cooperation of all parties. ***Please remember that these services are about the child (ren) and it is important to prioritize their need and right to have time and attention from all the people they care about.***

***How to Begin***

* First, each client completes and returns this packet, via email or fax, or meeting with Monitor.
* Second, once this packet is received, I will contact you to schedule an Intake either face-to-face or by phone. At this appointment, questions about my services are answered and a cooperative working relationship is established in order to create a foundation for success.

Please [complete](http://familynetworkofeasttexas.com/supervised_visitationexchange##) the attached packet and return it via email or fax. In addition to completing and returning the attached packet, I will also need:

* A copy of your picture ID and vehicle license plate number
* A picture of each child and adult that is listed in the Court Order that will be attending the visits
* Copies of all papers related to Court Orders and/or Protective or Restraining Orders
* Information regarding any previous Supervised Visitation/Exchange arrangements
* Details of the reasons for the request for service including Visitation/Exchange arrangements
* History of family violence, child abuse, parental dysfunction, mental illness or substance abuse
* Information regarding child (ren) chronic health condition, diets, medication, toileting and clothing
* Information on other services ordered by the Court, such as prior or current Custody Evaluations, Parent Education, Counseling Services, Batterer Intervention Programs, Substance Abuse Testing
* Payment for Intake Fees

I will go over the Policies and Procedures with you during the intake. Once the intake has been completed with both parents/guardians Supervised Visits or Exchanges will be scheduled and you will be ready to begin.

Thank you for considering Family Konnections. I look forward to servicing you and your child (ren).

***Bianca N. Taylor
Family Konnections
Executive Director***

***Ph: (408) 398-4200***

***Fax: (408) 904-7111***

 ***Email: FamilyKonnectionsGA@gmail.com***

 ***~ Providing Positive, Safe Supervised Visitation & Exchanges in the Greater Atlanta Area ~***

***Supervised Visitation***

The public policy of the State of Georgia is to protect the best interests of children whose parents have a custody or visitation matter within the Family Courts. Sometimes, based on issues of protection and safety, a judge will decide that in order for a child to have contact with a parent, a neutral third person must be present during any visitation. This type of third-person visitation arrangement is often called "Supervised Visitation."

***During the visit the Custodial parent must be available by phone in case of emergency. It is suggested you do not make any appointments that cannot be broken or be a distance of more than 15 minutes away during the visit.***

***Duties as a Supervised Visitation Provider***

As a supervised visitation provider, we will make every effort to keep your child (ren) safe and support your child (ren) in enjoying the visit with the supervised parent. Our job is to make sure that the child (ren) involved in the visit is safe and [free](http://www.supervised-visitation.com/##) from any unnecessary stress. We are not in the business to make the visit happen but to supporting visits that happen. The Monitor will be present at all times during the visit, will listen to what is being said, and will pay close attention to the child's [behavior](http://www.supervised-visitation.com/##). If necessary, the Monitor will may interrupt or end a visit. All Monitors will remain neutrality by refusing to discuss the merits of the case or agree with or support on party over another. Any discussion between the provider and the parties should be for the purposes of arranging visitation and providing for the safety of the child (ren). The Monitor will document events, activities and incidents that occur before, during and after visitations. Notes will be used to develop Supervised Visitation reports and will be part of the Client File. Any information given to the Monitor regarding something that happens outside of the visit will also be documented.

A report of the visit is written and is limited to the facts, observation and direct statements made by the parties and not personal conclusions, suggestions or opinions of the Monitor. The report does not contain any opinion or recommendation regarding future visitation unless otherwise ordered by the courts. The Monitor cannot verbally offer opinion or recommendations regarding future visitation arrangements/or child custody determination. The Monitor will adhere to the Georgia Code Title Domestic Relations 19-9-3. **All providers are Mandated Court Reporters and are required to report suspected child abuse to the Child Abuse Hotline at (800) 540-4000.**

***Service Area***

Our Monitors are available for Supervised Visitation and Exchange monitoring services in Fulton County, Dekalb County, Cobb County, Gwinnett County, and Forsyth County. (Additional fees for services depending on the County, such as mileage and travel time).

***Hours of Operation & Fees***

|  |
| --- |
| Our hours of operation are very flexible. Please [contact me](http://www.supervised-visitation.com/contact-denise.html) to set up an initial appointment. |
| Supervised Visitation  | $65.00 - $85.00 Per Hour |
| Supervised Exchange  | $40.00 - $55.00 Each Way\* |
| Intake Fee  | $50.00 Per Parent, see below\*\*  |
| Additional Letters or Logs for [Attorneys](http://www.supervised-visitation.com/fees.html##), Parents or Court | $50.00 - and up |

Visitation monitoring fees are hourly and visits are minimum one (1) hour depending on the County. Fees are payable in **Cash, Venmo, CashApp, Money Order, or Cashier’s Check** **only** (**No Exceptions**) and are paid at the time of service or in advance**.** **No Services** will be performed unless the fees for those services are [**paid in full**](http://www.supervised-visitation.com/fees.html##) prior to the services being provided. Additional Holiday rates apply.

**All visits over 6 hours must be paid in advance. Seven day (7) advance notification is required if Custodial or Non-Custodial parents wish to cancel or reschedule the visitation. If the visitation is cancelled with less than 7 day notice, the Monitor will be paid as if the scheduled visitation had occurred by the canceling parent. The payment must be paid in full prior to the start of the next scheduled visit. Should the fee not be paid at that time, all future visits/Exchanges will be suspended until the cancellation fee is paid in full.**

***\* There is a 5-minute Grace Period for Supervised Exchanges. Late fees of $5.00 per minute after the Grace Period have been exceeded.***

Our services are available 7 days a week, 365 days a year, from 8:00 am to 9:00 pm. This varies based on type of service.  **Additional rates apply for services before 8:00 am and after 9:00 pm.**

***Intake (Orientation) Process***

As part of the orientation process both Custodial and Non-Custodial parents and all adults who are listed on the Court Order and will participate in the visit must complete an Intake before visitation/Exchange services can begin. The fees for the Intake is **$50.00 per parent.** The Intake fee is **non-refundable,** however if only one person completes the Intake and the full payment of $100.00 has been made $50.00 will be refunded. Each parent must pay their own Intake Fees, unless the Court Order specifies differently. The Intake can be done by phone, however must be paid in advance via Venmo or CashApp. Sliding Scale does not apply to Intake Fee. **\*If additional guests or family members will be attending the visits an additional Intake will be required and a $25.00 Intake Fee will apply.**

The Custodial and Non-Custodial parent must schedule to meet with the Monitor to complete the Orientation Process. The parents will be interviewed at separate times to discuss the visitation process, family history, including child maltreatment or partner abuse. This is also a screening process which is used to assist the staff to assess the nature and degree of risk for each case, as well as determining the safety needs and the level of monitoring necessary for the visit. If the child is of sufficient age and capacity, the child can be included in part of the Intake or Orientation process. Any discussion should be presented to the child in a manner appropriate to the child’s developmental stage.

Each parent will be provided a copy of the Policies & Guidelines and as well as Rules of Conduct and everything will be explained in detail. Please allow one (1) hour for the Intake process for Supervised Visitation and 30 minutes for Supervised Exchange Intake process. The parents will indicate their available schedule.

If there is a break in Supervised Visitation or Exchange services for 6 months or more a new Intake is required prior to resuming services. This requires a new Intake with both parties and new Intake Fees to be collected prior to services being rendered.

***Fees for Reports, Letters, Logs & Correspondence*** The fee for copies of the Observation Reports is $20.00 per report for up to a 4 hour visit, payable in advance. For all reports for visits exceeding 4 hours additional fees apply based on the length of the visit. Copies are given to Custodial, Non-Custodial parents and/or Attorneys regardless who provides payment. The payment is due prior to the release of the reports and correspondence. Supervised Exchange Observation Report is $5.00 per Exchange. The request must be received at least thirty (30) days before they are needed, especially when there is a court date. The form included in the packet is required, otherwise a text or email is acceptable. Fees for letters, logs with detailed correspondence including texts and emails vary from $50.00 and up. Additional advance notice is required for all correspondence other than reports. **If reports or other correspondence are needed in a rush situation additional fees will apply.**

***Reports must be requested within 90 days of visit, all reports and additional correspondence will be destroyed and not available if requested after this time.***

***Visitation Expenses of Monitor*** During a visit the Non-Custodial parent is responsible for the Monitor’s expenses associated with such things as parking charges, admission fees, food expense, etc.

***Holiday Schedule & Rates*** Visitation services conducted during Federal, National Holidays are payable at $75.00 to $95.00 per hour. Supervised Exchanges rates are payable at an additional $10.00 each way. Visitation services are scheduled according to availability of the Monitor. **If your scheduled visit falls on a holiday you are required to inform the Monitor of your intent to request a schedule change to avoid the holiday rate. This should be done at least two (2) weeks prior to the visit date.**

 **~ 2019 Federal & National Holidays Observed ~**

|  |  |  |
| --- | --- | --- |
| Monday, Jan 1 - New Year’s Day  | Monday, May 27 - Memorial Day  | Monday, Nov.11 - Veterans Day  |
| Monday, Jan 21 - MLK Jr. Birthday  | Sunday, June 17- Father’s Day  | Thursday, Nov.22 – Thanksgiving |
| Monday, Feb 18 - Presidents’ Day  | Thursday, July 4 - Independence Day  | Wednesday, Dec.25 – Christmas |
| Sunday, April 21 – Easter | Monday, September 2 - Labor Day  |  |
| Sunday, May 13 - Mother’s Day | Monday, October 14 - Columbus Day  |  |

***Charges for Supervised Visits & Exchanges outside Local Area*** Travel time and mileage of the Monitor for visitation will apply due to the County or the distance from Monitor’s home base (Atlanta International Airport) to site will be determined based on round trip distance and time involved to reach destination. Georgia Mileage Rate per mile of $.53 cents per mile applies. Minimum two (2) hour per visit applies depending on the visiting location.

***Visitation Cancellation / No Show Policy***If Custodial or Non-Custodial parents wish to cancel a Supervised Visit or Exchange a twenty-four (24) hour advance notification is required. If cancellation is health related it must be confirmed with a Doctor’s Note. **When the visit or Exchange is cancelled without the required notice the Monitor will be paid as if the scheduled visitation or Exchange had occurred by the canceling parent.** The payment must be paid in full prior to the start of the next scheduled visit or Exchange. Should the fee not be paid at that time, all future visits/Exchanges will be suspended until the cancellation fee is paid in full.

If a visit is scheduled and the Non-Custodial or Custodial parent does not show up or call to cancel the visit the Monitor and Custodial or Non-Custodial must remain at the visiting location the entire time of the scheduled visit. This is done to adhere to the Court Order. The Monitor will be paid in full as if the visit occurred even if the entire visit is not completed.

***Visit Scheduling***

Unless the Court Order specifies the time and dates of the visits, the Monitor will work with each parent to arrange a mutually agreed schedule. Otherwise, the visits will follow the frequency and times of the visits or Exchanges. If a mutually acceptable visitation/Exchange schedule cannot be reached the parents will be required to go back to court to resolve the terms and conditions of the visitation or Exchange. If the Monitor cannot accommodate the visitation/Exchange schedule ordered by the court there may be a need to change the court ordered schedule or to seek out another service provider.

***Medication and Diet***

During the Intake process the Custodial parent must inform the Monitor if the child (ren) has any medical concerns, disabilities, dietary or special needs, and if the child (ren) is taking any medications. No medications will be given to the child (ren) during the visit, which includes prescription or non-prescription drugs. Exceptions will be made at the discretion of the Monitor in the cases of emergency. If an emergency occurs the custodial parent will be notified.

***Food and Beverages***

Unless the court specifies otherwise, or as a result of safety concern, the Non-Custodial parent is allowed to bring food and beverages to the visit, except for children under 2 years old. For all children under 2 years old the only food provided by the Custodial parent is allowed. The Monitor reserves the right to intervene if a child is consuming unreasonable amounts of food and beverages during the visit and if it appears certain foods are

being used as a battering tactic to cause harm to the child (ren). It is not the Monitor’s job to state what foods can be brought or given to the child (ren).

***Monitor Responsibility***

The Monitor is temporarily responsible for the care of the child (ren) at the following times only:

1. When the child (ren) is collected from the Custodial parent and taken to the Non-Custodial parent.
2. When the child (ren) is returned to the Custodial parent after the visit or Exchange.

If a visit is stopped for safety issues, or other concerns or situations, the Monitor will immediately contact the Custodial parent and request the child (ren) be picked up as soon as possible.

If the Custodial parent does not return at the scheduled time to pick up the child the Monitor will attempt to reach the person assigned as the emergency contact. If after a thirty (30) minute search and the Custodial parent or emergency contact or other designated person(s) authorized to pick up the child cannot be reached the Monitor will contact CPS and inform them of the situation.

***Adults and Relatives at Visits***

In order for third parties to be present during a visitation, a Court Order, which allows relatives or third parties to be present during visitation is necessary or **Special Circumstances Warranted and Approved at the Sole Discretion of Family Konnections.** It is at the discretion of Family Konnections, how many relatives or third parties are allowed at visitations, ie. birthday, holiday or family celebration. It is beneficial for the child (ren), that the number of adults be limited.

***Photos***

Photos are allowed, unless otherwise restricted by the court. (Should the subject case note allegations of sexual molestation or assault, no photos will be allowed). Photos taken during the visit should not be taken for the intent of posting.

***Gifts***

Gifts can be brought and given to the child (ren) unless otherwise restricted by the court. Unacceptable gifts include but are not limited to weapons of any type, gifts intended for the Custodial parent, gifts that are sexual in nature, gifts that promote or depict violence, or gifts that are not appropriate for the child’s age such as toys with small objects for children under the age of three (3) years old.

***Recording of Conversations***

Family Konnections’ policy prohibits conversations between the Monitor, parents and/or child (ren) to be recorded. However, recording the child (ren) playing or opening gifts, etc., are allowable on a case by case basis and the recording cannot be used for the purpose of presenting in court. Please do not attempt to photograph the Monitor as it may result in termination of Family Konnections services.

***Safety and Security***

The Monitor will be present at all times during the visit or Exchange. The arrival and departure times will be staggered intervals. This will be explained during the Intake. Any violation of these rules will be documented by the Monitor and can result in suspension or termination of services.

The Monitor will make reasonable efforts to ensure the safety of the child (ren) and to help reduce the potential risks of harm. The Monitor will notify law enforcement immediately or the appropriate authorities if the Non-Custodial parent leaves with the child (ren) or if there are threats or indications of violence or abuse. If the Monitor determines that the risk factors present are placing in jeopardy the safety and welfare of the child, the parent, or the Monitor the visit or Exchange will be suspended or terminated. The Monitor will also decide based on the risk factors or safety concerns of the case the location of the visit or Exchange.

If warranted prior to the first visit the Monitor will work with the child to select a code word or sign for the child to use should the child for any reason become uncomfortable or wish to speak privately with the Monitor.

***Sight and Sound of Child (ren) During Visit***

During a visit, the Non-Custodial parent and the child (ren) must remain within visual sight and hearing of the Monitor. Under no circumstances during the Visitation can the child (ren) be left alone with the Non-Custodial parent.

The visiting parent must comply with this instruction and must make an effort to stay in proximity to the Monitor. The visiting parent must not venture away from the assigned Monitor. A violation of this will constitute a breach of the entire agreement or contract and all services will be terminated. Family Konnections understands during extended visits, there will be short periods of time (five minutes or less) that visiting parents, child (ren) and/or the Monitor will be out of sight and sound due to the need to utilize restroom facilities. The Monitor will accompany child (ren) nine years or younger if the facility permits or wait outside the exit for the male child.

***Spoken Language***

English shall always be spoken during a visit. Other languages are not allowed unless the Monitor is proficient in such languages or a state-certified interpreter is utilized at the expense of the parent requesting the interpreter.

***Visitation Sites***

The location of the visit must be pre-arranged and confirmed with the Monitor by the Custodial and Non-Custodial parent before the end of the previous visit. The visiting parent may request a specific site, although the Monitor will make the final determination of the visiting location, however no visits may occur in a public pool. It is the Visiting Parent’s responsibility to contact the location to confirm the hours open for business and there is not an activity that will prevent access to the facility, ie., bowling tournament, etc.

If the Court Order does not specify if the visit can or cannot take place at the home of the visiting parent (Addendum to FL-341 A) and both the Custodial and Non-Custodial parents agree this must be received in writing from both parents.

If at any time the Monitor suspects a third party is monitoring the visits, whether the third party represents Custodial or Non-Custodial parent, the visit will be terminated immediately.

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***Refusal to Visit***

If the child (ren) states upon arrival that he/she does not want to visit the Custodial parent is advised to encourage the child (ren) to attend the visit.

If the child (ren) declines to visit the Monitor will do the following:

1. Take the child aside to speak with him/her in private
2. Offer a shortened visit, or offer the child to just say hello to the parent
3. Create an age appropriate activity to invite the child to engage in
4. If the child (ren) continues to decline the child’s response will be documented and the Monitor will discuss future attempts to facilitate a visit/Exchange.

If the child (ren) refuses to visit the case should be referred back to the Court for further instruction as this is a violation of the Court Order.

 ***Interventions during Visit/Exchanges***

The Monitor reserves the right to terminate a visit/Exchange if safety for the child (ren), parents or Monitor is placed in jeopardy and when necessary to prevent and/or resolve incidents and situations that are violations of Court Orders and Supervised Visitation guidelines. The decision whether or not to intervene is often subjective. The training and skills of the Monitor, as well as parents’ experience and ability to effectively parent are important consideration in determining whether or not the Monitor should intervene during the visit or Exchange. Some interventions will be done in front of the child (ren) and sometimes they will not; however we don’t want the child (ren) to know or feel as though they did something wrong or that they got the parent in trouble. Our intent is to let the child (ren) be themselves during the visit. Depending on the Monitors’ assessment and the child’s reaction, the Monitor may temporarily stop a visit or a visit may be ended entirely. Terminating a single visit does not necessarily mean that supervised visitation services for the family will be stopped permanently. All interventions will be documented.

***Chance Encounter***

If during a visitation the Custodial parent encounters the Non-Custodial parent and child (ren) on a Chance Encounter the Custodial parent is required to leave the area immediately and is prohibited from approaching the Non-Custodial parent or child (ren).

In the unlikely event both parents have arrived at the Visitation site and the Monitor is not present for reasons beyond their control, the visiting parent shall not approach the child (ren) or the Custodial parent until a Monitor is present. If the Monitor has not arrived after thirty (30) minutes from the scheduled start of the visitation period, both parties shall leave the area.

If there is a Chance Encounter with a friend/family member it is the responsibility of the visiting parent to handle the situation as discretely as possible. The contact between the friend/family member should be no more than thirty (30) seconds. If not, the Monitor will remove the child (ren) from the vicinity while the parent advises or explains to the person the situation and asks the person to leave the area. Parent must provide name and relationship of the friend/family for documentation purposes.

***Parent Request for Transportation***

 Under normal circumstances, Family Konnections or authorized personnel shall not provide transportation services to either parent or the child (ren). Under conditions of medical emergency or safety, the Monitor shall call for appropriate personnel who can provide transportation. If no one is available, and if there is a life-threatening situation, the Monitor or authorized personnel are authorized to transport child (ren) provided the parents understand transportation would be provided under a Good Samaritan policy. The Monitor will provide transportation under court order provided parents assume all liability and costs thereof. ***At the Monitor’s discretion, special circumstances may warrant providing transportation on a case-by-case basis and the Custodial Parent is responsible for the additional fees for time involved to transport.***

***Termination of a Visit***

A visitation may be terminated at any time by the Monitor if the best interests of the child(ren) are not being served, the rules of the visit have been violated, the child(ren) have become distressed, or the safety of the child(ren) and provider is at risk. Both parties will be informed of the termination and a written report will be provided to the parties, attorneys, and court. In the event the Monitor terminates a Visit, the Custodial parent will be informed immediately when possible. The Monitor cannot be held responsible if the Custodial parent cannot be located. In the event a Custodial or Non-Custodial parent terminates a visit, for whatever reason, the parent responsible for the termination is responsible for the entire fee.

In the event of an emergency termination the Custodial parent will be immediately notified or as soon as practical. If the Monitor is unable to make contact, then the child (ren) will be maintained in a safe environment until the pre-scheduled pick-up time. The Custodial parent is responsible for providing an emergency contact name, address, and phone number to be used in the event of an emergency situation occurs.

***Behavioral/Medical Characteristics***

The Custodial parent/designee shall inform the Monitor of any current behavioral/medical problems or conditions, which warrant attention. This is especially important when the child (ren) has developed behavioral/medical problems since the last visit/Exchange.

***Failure of Custodial Parent to Pick up Child (ren)***

In the event Custodial parent fails to promptly pick up child (ren) at the conclusion of a scheduled visit, and the Monitor is unable to contact designated individuals listed in parental information sheet, then the Monitor reserves the right to contact the appropriate agencies, i.e. CPS or local police department.

***Termination of Services***

Family Konnections retains the right to terminate services for non-payment of fees. Family Konnections retains the right to terminate for non-compliance with the financial policies, administrative policies, visitation policies, and procedures.

***Extraordinary Circumstances, Fees and Charges*** Family Konnections reserves the right to adjust its basic hourly rate and non-personnel charges for professional services when a particular case warrants specialized personnel (such as peace officers) or circumstances requires unusual non-personnel charges. Each case in this category is quoted and handled on a case-by-case basis at Family Konnection’s discretion.

***Court Testimony***

In the event the Monitor is served a subpoena by counsel to provide testimony in deposition/court concerning the Monitor’s observations of visitation activities and behavior, Family Konnections shall charge $80.00 per hour for Court Testimony, which includes case review, preparation time, travel time, wait time, mileage, and associated direct expenses. A minimum one-half-day deposit, $200.00 is required for court testimony to be paid one week prior to the court date.

The Monitor will not provide voluntary testimony. The visiting parent or Non-Custodial parent’s counsel must determine if it is necessary for court appearance and shall issue a subpoena. The subpoena must not be served to the Monitor during the visitation period and alternative means must be utilized. Arrangement can be made to meet the Monitor to deliver subpoena, by use of a process server or by email as the notice must be given to the Monitor if court appearance with a reasonable amount of time before appearance is requested so arrangements can be made to be available.

 ***Telephone Standby Time***

 While the Monitor is on Telephone Standby to be called to court to testify, the basic hourly fee is 50% of the basic rate if no other income-producing activity is in progress. If, however the Monitor is on income-producing assignments and visitation must be cancelled, then standby time is charged at normal hourly rates for the particular visitation period in full.

***Payment Discretion***

Discussion of financial issues among the parties in front of the child (ren) causes the child (ren) distress. Do not discuss with the child (ren) financial issues, i.e. advising child (ren) visitation not occurring due to parent’s finances, etc. Payment should be handled discreetly. The Monitor prefers that financial matters among the parties be conducted when the child (ren) are not present.

***Case Discussion***

Discussion by either parent of the case with the Monitor during, or after a visit in front of the child (ren) is prohibited. This should be discussed by telephone, email or at a time other than before the visit or Exchange.

***Confidentiality/Case File Information***

Any communications between parties and providers of supervised visitation are not protected by any privilege of confidentiality, which includes conversations, letters, cards, emails, texts, etc.

Any identifying information about the parties and the child(ren), including addresses, telephone numbers, places of employment, and schools, is confidential, will not be disclosed, and will be deleted from documents before releasing them to any court, attorney, attorney for child(ren),party, mediator, evaluator, mental health professional, social worker, or referring agency, except as required in reporting child abuse.

***Full Payment of Fees Earned upon Termination of Visit***

The Monitor’s full fees are earned and payable, nevertheless, for the full scheduled visitation period in the event of the following:

a. A visitation is terminated for violation of Family Konnections rules. The responsible party is liable

 for the monitoring fee.

b. A visiting parent, Custodial parent, or responsible party does not show for the scheduled

 appointment.

c. The scheduled visitation is terminated because of illness of the child (ren) or the child (ren)

 wishes to go home early.

d. A visiting parent, Custodial parent, or responsible party shows up for the scheduled visitation and

 does not follow through with the court ordered visitation.

 **\*\*\**These charges are due and payable before the next scheduled visitation takes place*\*\*\***

***Periodic Amendments & Fee Adjustments***

The fees, policies, and contract may at the discretion of Family Konnections, be amended at any time without prior notice. Current clients will be advised and requested to comply and execute the amended documents.

Family Konnections reserves the right to alter its basic professional fees, charges, extraordinary fees, prices, and charges at any time without notice.

 ***Applicable Law & Terms of Agreement***

 The parties agree this Agreement shall be construed as a State of Georgia contract. This Agreement shall become effective immediately upon signing by the parties, and shall remain in effect until professional services have been completely rendered, Family Konnections withdraws from the case, a court order terminates said professional services, or if one or both parents ­withdraw.

 ***Prevailing Party***

 In the event an Action-at-Law is undertaken by any party to enforce this agreement, Family Konnections shall be entitled to full attorney's fees, court costs and any other costs which court may award. If any provision of this agreement is held in whole or in part to be unenforceable for any reason, the remainder of that provision and of the entire agreement will be severable and remain in effect.

***Policies and Procedures***

 1. Monitor will be present at all times during visitation/Exchange and is monitoring from the moment of

 arrival.

 2. All contact between child (ren) and the Non-Custodial parent shall take place within Monitor¹s hearing

 and sight at all times.

 3. Fees for services shall be paid in full, in exact Cash, Venmo, CashApp, Money Order or Cashier’s Check

 prior to the start of each visit. **Fees for scheduled visits 6 hours or more are due 7 days in advance.**

 4. Non-Custodial parent shall arrive 15 minutes prior to scheduled visit /Exchange. Visiting parent shall

 arrive promptly at scheduled time. (This is enforced on a case-by-case basis, if needed can be up to

 30 minutes).

 5. Custodial parents shall arrive promptly at the end of each scheduled visit to pick up child/children.

 Visiting parent shall wait until Monitor returns from returning child to Custodial parent and is advised by

 Monitor it is okay to leave.

 6. Custodial and visiting parent will adhere to Monitor’s guidance at Exchange and during scheduled

 visitation. Non-compliance with guidelines or challenging the authority of the Monitor may lead to

 termination of services at the discretion of the Monitor.

 7. The visitation must be a mutually agreed location between the visiting parent, Custodial parent and

 Monitor, however no visits may occur in a public pool. It is the Visiting Parents’ responsibility to contact the

 location for hours and possible closures or other events being held at the location prior to scheduling a visit

 at the site.

 8. Cancellation or rescheduling of visitation requires twenty-four (24) hour advance notification and both

 parents must confirm mutually agreed upon rescheduling and cancellations. If visitation is cancelled with

 less than twenty-four (24) hour notice the Monitor will be paid as if visitation or Exchange had occurred. If

 the cancellation is for health reasons and a Doctor’s note is provided the parent will not be responsible for

 the visit or Exchange fee. Cancellation for a visit scheduled over 6 hours requires seven (7) day advance

 visit or Exchange fee. If cancelled with less than a seven (7) day notice, Monitor will be paid as if visitation

 had occurred.

 9. If Custodial parent or designee fails to arrive with child/children without sufficient prior notice of

 cancellation to the Monitor (see 7), Custodial parent or designee shall pay for missed visitation.

 Additionally, Monitor will be paid as if visitation had occurred.

10. If the visit is scheduled and the Non-Custodial or Custodial does not show up or cancel the parent that

 is there must remain at the location for the entire visit in case the parent arrives.

11. If either parent should cancel, or is late for more than three (3) visits or Exchanges within a two (2)

 month period services may be suspended or terminated. All cancellations and tardiness will be

 documented and available for clients to give to court. If a visit begins late due to the Non-Custodial or

 Custodial Parent arriving late the parent does not have to extend the time to account for the full visit. All

 parties can agree to extend the visit or add time to a future visit or not at all. If a visit is cancelled a make-

 up visit can be requested. Make-up visits are based on availability and cannot be guaranteed. After two (2)

 consecutive cancelled or missed visits the designated visitation time slot is not guaranteed unless the

 missed or cancelled visits are paid for.

 12. Alcohol and drugs are not allowed during any visit or Exchange. Anyone who appears to be under

 the influence of alcohol or non-prescription drugs will be informed the visit is cancelled. Law

 enforcement may also be notified.

 13. Parents and child/children must speak English during visitation/vvExchange and must speak loud

 enough for Monitor to hear.

 14. All cell phones must be on silent or vibrate during the visit and parent is not allowed to talk on the

 phone during the visit. A cell phone or camera is allowed to take pictures if not prohibited per court order.

 15. Once the visit begins the visiting parent may not leave the visit. Should the parent do so, the

 visitation will be terminated.

 16. Exchange of money between Non-Custodial parent and child (ren) is not permitted unless otherwise

 previously approved by Custodial parent.

 17. Visits only allowed by persons approved by the court. All persons participating in the visit must bring

 photo ID to the visit. It is the responsibility of the Non-Custodial parent to ensure visitors follow all

 program policies and procedures.

 18. The location of the visit must be confirmed with the Monitor by the Custodial and Non-Custodial

 parent before the end of the previous visit. In the case of bad weather the location must be

 confirmed 24 hours prior to the visit by both parties.

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***Rules of Conduct***

The following is prohibited during Visitation or Exchange:

1. Inappropriate demands for physical contact, foul language, shouting, threats of violence or abuse,

 attempts to move child/children out of sight or hearing of Monitor.

2. The Non-Custodial parent shall not whisper, make gestures, hand signals, give cassettes or DVD’s to

 play later or otherwise attempt to manipulate the emotional context of the visit.

3. Passing of correspondence or messages to the other parent (such as regarding legal matters) through

 child (ren) or Monitor. Discussing with child (ren) financial issues, i.e. advising child (ren) visitation not

 occurring due to parent’s finances, etc.

4. Using the visitation for the service of court documents.

5. Sharing of detailed court information or court documents with the child/children and/or making of

 promises about future living arrangements, time sharing or visitation modifications. Visit discussions

 should focus on the present to avoid pressure and/or disappointment. Parent is required to re-direct the

 conversation if the child brings starts the conversation.

6. Speaking negatively about the other parent, his or her family or designee in front of the child/children

 and/or questions about the other parent’s whereabouts or activities. Parent is required to re-direct the

 conversation if the child brings starts the conversation.

7. Permanent alterations of child/children during visitation without prior written consent of Custodial

 parent. Alteration includes but is not limited to haircuts, (case by case basis), tattoos, body or ear piercing.

8. Smoking and/or tobacco use is **PROHIBITED** during a visit or Exchange.

9. Weapons or any articles that could be used as a weapon at site of visitation or Exchange.

 10. Contact (if Restraining Order) or confrontation between parents during visitation or Exchange.

 11. Pets are not allowed during the visit/Exchange. This does not apply if the visit is at parent’s home.

 Exceptions may be approved based on Monitor discretion, however this must be pre-arranged prior to

 visit or Exchange.

Please Note:

1. Monitor will only convey information between parents regarding child/children’s medical needs and/or

 visitation and Exchanges. The Monitor will not pass notes; deliver checks, or otherwise transport

 personal property of either parent to the other.

2. Unless medically authorized or prohibited, dietary requests are not monitored or enforced.

3. Custodial and visiting parents are required to meet the needs of child/children during visitation times

 (i.e., bring diaper bag, baby food, change of clothes, change diapers, etc.).

4. Monitor has emergency procedures and security measures in case of abduction.

***Family Konnections reserves the right to refuse, cancel, or terminate visit/Exchange services for violation of the agreement or if it is determined that it is not in the best interest of the child and/or others involved to accept or keep the case. Family Konnections will provide written notice of the specific reasons for termination or non-acceptance and a copy of this notice will also be sent to court, the other parent, and the attorney.***

\*Revised effective January 2019\*

***Tips for the Visiting Parent***

Being with your child in the presence of someone else may be uncomfortable for you, at least in the beginning. You probably have many questions and concerns, and that is perfectly understandable. During tough times you may want to talk to a Mental Health Professional or find a Support Group to help you with your feelings. Do your best to focus on your relationship with your child. Your patience and commitment will [pay off](http://www.supervised-visitation.com/tips.html##). Here are some suggestions that might be helpful to you:

* Read the court order
* Arrive and depart on time
* Avoid discussing the court case or terms of the visit with your child
* Avoid quizzing your child about the other parent's activities and relationships
* Avoid making your child a messenger to the other party
* Say brief and positive good-byes to your child when the visit is over

***Tips for the Custodial Parent***

Supervised visitation can also be a challenge for you. Typically you have been taking care of your child's everyday needs and have a routine for yourself and your family. Supervised visitation can sometimes feel like one more responsibility. Of course you also have concerns and questions about the visits and how they will affect your child. This is understandable; however remember you do not dictate what happens during the visit. In difficult times you may also want to talk to a Mental Health Professional or find a Support Group where you can talk about your feelings. Here are a few suggestions that might help you in the process:

* Read the court order
* Explain to your child where and when the visits will take place
* Have your child ready on time and be prompt
* Reassure your child that you support him or her in having a pleasant visit
* Avoid quizzing your child about the visit
* Avoid making your child a messenger to the other party
* Send the child (ren) with a favorite toy, blanket, or other item, which facilities familiarity and security for the child (ren).

***What Both Parents Need to Know***

If you need to change the visitation schedule, the provider cannot do that for you. To assist you in filing the proper paperwork, contact your attorney or the [Family Law](http://www.supervised-visitation.com/tips.html##) Facilitator If you cannot agree on how to modify the court's order and you are both willing to meet with a Court Mediator to assist you in reaching an agreement that can then be filed in court and become an order, call your Family Court Services Office. A Supervised Visitation can be difficult and uncomfortable at times. Often there are hurt and angry feelings toward the other parent, and it seems impossible to have a positive attitude about supervised visitation. Remember that both of you care about your children, and that, if possible, children benefit from having two parents in their lives.

***Family Konnections Visitation/Exchange Agreement***

***\*\*Completed by Visiting & Custodial Parent\*\****

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have read and do hereby acknowledge that this **AGREEMENT FOR SERVICE** has been explained to me by a member of Family Konnections and I agree to and understand the terms and conditions outlined above. I have also been given a copy of the Policy and Procedures and Rules of this agreement. I understand the guidelines were developed, reviewed and explained and are in compliance with the Court Orders and Georgia Code Title, Domestic Relations 19-9-3.

I understand that the failure to comply with the above policies and procedures can result in ending a visit or Exchange, suspensions of services or termination of Family Konnections services.

Signed:

­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Custodial Parent Signature Date

­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Custodial Parent Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_

Family Konnections Staff Date

***Supervised Visitation & Exchange Fee Agreement***

***\*\*Completed by Visiting & Custodial Parent\*\****

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have agreed to pay the fee of $\_\_\_\_\_\_\_\_\_\_\_\_per hour for Supervised Visitation or $\_\_\_\_\_\_\_\_\_\_\_\_for Supervised Exchange services each way to Family Konnections. The Cancellation Fees, Late Fees, Observation Reports and Correspondence Fees, and Court Testimony as well as Telephone Standby Fees have all been explained to me and I agree to pay these fees if applicable.

Signed:

­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Custodial Parent Signature Date

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Custodial Parent Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_

Family Konnections Staff Date

***Authorization Disclosure Form***

***\*\*Completed by Visiting & Custodial Parent\*\****

The below statement gives Family Konnections permission to provide the Superior Court of the perspective County, Evaluator(s), and all Attorney(s) identified on the Parent Information Form with confidential information pertaining to my case.

I, (print your name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby give consent for Bianca N. Taylor, Executive Director, Family Konnections to release or receive any information deemed necessary to Superior Court, Attorney, Attorney for child(ren), Mediator, Evaluator, Mental Health Professional, Social Worker, or Referring Agency.

 This is relevant to the purpose stated below from the case records of:

 (Name of Client) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Relationship to Client: (circle one) Self Spouse Parent Guardian

The purpose for this information: (circle one)

1. Supervised Visitation
2. Supervised Exchange
3. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

This authorization is valid for as long as the parent receives services from Family Konnections, or until revoked by me, whichever occurs first.

I understand that all information involved will be kept confidential from persons not authorized.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Parent Information Form***

***\*\*Completed by Visiting & Custodial Parent\*\****

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State/zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Hm) Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check one: Father \_\_\_\_\_\_\_\_ Mother \_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_

DL# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender \_\_\_\_\_\_ Hair \_\_\_\_\_\_\_\_Eyes \_\_\_\_\_\_\_

Height \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight \_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_

Scars/ID Marks \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ethnicity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Citizenship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medications \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vehicle 1**

License Plate #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_ Make \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Model \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vehicle 2**

License Plate #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_ Make \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Model \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attorney**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mediator**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_ Fax ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Evaluator**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appointment date for next Mediation, Evaluation, or Court Session - Please specify:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Local Emergency Contact**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_\_\_\_ Zip code\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What Are The Reasons For Obtaining Services? (Circle all that apply)**

Child Abuse or Allegations Child Abandonment or Neglect

Child Sexual Abuse CPS Case Currently Open Concerning Child Safety

Domestic Violence or Allegations CPS Case in the Past Concerning Visiting Parent

Child Physical Abuse Abduction (kidnapping) Risk

Child Emotional Abuse Fear or Knowledge of Stalking

Substance Abuse Mental Illness

Lack of Access to Child Long Absences

Anger Management Parental Alienation

**# of times has Visitation Orders for Custody/Visitation issues been filed in court?** \_\_\_\_\_

**Are you on speaking terms with the other parties in the case?** Yes/No

**Forms of communication with parent, ie.,Text, Email, Family Wizard, Talking Parents?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have the police ever been called due to conflict with the other parent?** Yes/No (circle)

If so, provide details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is there a Restraining Order in effect?** Yes/No (circle) If so, provide details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Has there ever been a Restraining Order?** Yes/No (circle) If so, provide details

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Last Interaction with Child (for Non-Custodial Parent)** Please provide date last saw the child and describe the interaction \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Information regarding any previous Supervised Visitation or Exchanges including name of provider** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Please Fill In Your Availability Below:**

**Monday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tuesday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Wednesday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thursday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Friday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Saturday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sunday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please Provide The Following Information Along With Parent Intake Form:**

**Both Parents**

1. Signed Supervised Visitation and/or Exchange Agreement & Disclosure Form for the Adult
2. Copy of Driver’s License, Personal Identification, Copy of Passport and/or Alien Registration Card
3. Copy of Court Orders and Restraining Order (if applicable).
4. CPS Documentation if Applicable

**Custodial Parent**

1. Authorization for Emergency Medical Treatment, Authorization Disclosure Form for the child (ren) and Release of Liability Forms for the child (ren).
2. Recent photograph of child(ren)
3. Copies of the following documents of the child(ren):

a. Medical Insurance Card and phone number

 b. Copy of Passport or Personal ID Card for the child (ren)

 c. Photograph of any Designee authorized to transport the child (ren)

4. Photograph, name, address, and phone number of an emergency contact

 5. Child Intake Form for each child

Referred to Family Konnections by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Child Intake Form***

***\*\*Completed by Custodial Parent\*\****

***(One form required for each child)***

 **(Please complete for each child who is participating in the Supervised Visits or Exchanges)**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does child attend school? Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_ If so what grade? \_\_\_\_

Is child potty trained? Yes\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is either parent of the child incarcerated at this time? Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_

If so, where and for how long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the child ever been present during domestic violence? Yes\_\_\_\_\_ No\_\_\_\_\_\_\_\_

Is the child receiving counseling? Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the child ever received counseling? Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_

How often? Weekly\_\_\_\_\_\_\_\_\_ Monthly\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What has the child been told about visitation and what was their reaction? Are they excited,

Anxious,resistant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide any behavioral issues or concerns regarding the child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the child’s extracurricular activities (example baseball, soccer, dance, karate, etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please list the child’s favorite things:

Colors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Foods\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subjects in school\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TV Show/Movie(s) \_\_\_\_\_\_\_\_\_\_ Pet(s) \_\_\_\_\_\_\_\_\_\_

Friend(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Medical Information***

Name of Health Insurance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Policy#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pediatrician/Family Physician\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ph#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Concerns (allergies, chronic health issues) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication(s) taken child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please be advised no medications will be given to the child during the visit, which includes prescription or non-prescription drugs. All medication for any and all health issues must be given to the child by the Custodial Parent prior to or after the visit. Any special needs must be cleared prior to the visits. Exceptions will be made at the discretion of the monitor in the cases of emergency. If an emergency accident or injury which occurs during the visit the legal guardian will be notified. The legal guardian will determine the course of action.**

Signature of Legal Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Family Konnections Staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Authorization and Consent For Medical Treatment***

***\*\*Completed by Custodial Parent\*\****

I hereby authorize Family Konnections, or their representative to consent, on my behalf, to emergency medical care treatment for my child:

Child (ren) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

While he/she is in their care, said treatment shall be in the discretion of the emergency care physician.

This authorization shall become effective immediately and shall remain in effect for one year from the date of signature. A photograph of the authorization shall stand as valid as the original.

Executed on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Georgia.

Parent Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Transportation & Release of Child to Someone Other Than Custodial Parent***

***\*\*Completed by Custodial Parent\*\****

I am aware that as legal guardian of child (ren) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_it is my responsibility to transport the child (ren) to and from the Supervised Visit/Exchange. In the event I am not available to pick up my child (ren) I authorize my child (ren) to be released to the following person(s) who **MUST** have a photo Identification on file with Family Konnections.

In the event of an emergency and someone other than those listed below will transport my child (ren) I will notify the Monitor in advance. I am aware anyone showing up to transport my child (ren) that are not on the list will not have child (ren) released to them.

I authorize Family Konnections Staff to pick up and transport my child (ren) if needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name Number Relationship to Child

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name Number Relationship to Child

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Custodial Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Supervised Visitation Guidelines for Alleged or Known History***

 ***Of Child Sexual Abuse Perpetrators \*\****

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have received a copy of the following Rules of Conduct, which has been reviewed and explained to me by the undersigned Monitor. I understand that these rules are an addendum to the Supervised Visitation Policies and Procedures for Family Konnections which I must sign and agree to abide by as well.

1. I understand that I am not permitted to Exchange gifts, money or cards with my child (ren), unless authorized by the Court.
2. I understand that I may not take any photographs, video or audio recording of my child (ren) during visitation.
3. I understand that I must refrain from making any physical contact with my child (ren) unless express permission from my child (ren) is given.
4. I understand that I must limit any physical contact with my child (ren) to brief hug or kiss on the cheek.
5. I understand I must discourage excessive and/or inappropriate physical contact which is initiated by my child (ren). If I am unable to do this successfully, I agree to accept suggestions offered by the Monitor.
6. I understand that for the purposes of this agreement the term “physical contact” may include, but is not limited to the following activities:
	1. Sitting, crawling, or climbing on lap
	2. Personal grooming, e.g. hair brushing
	3. Stroking/patting hair, head, back, arms, etc.
	4. Hand holding, prolonged hugging
	5. Wrestling, tickling, horse playing, piggyback rides

1. I understand I may not whisper, pass notes or exhibit hand or body signals in attempts to communicate with my child (ren).
2. I understand that I am not permitted to change or assist with changing diapers of my child (ren), nor am I permitted to accompany my child (ren) to the rest room.
3. I further understand that any violation of this agreement may lead to the termination of visitation services by Family Konnections.

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Visiting Parent Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Family Konnections Staff Date

**\*\* If this does not apply, do not complete this form.**

***Request for Observation Reports & Correspondence***

***\*\*Completed by Requesting Parent\*\****

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am requesting copies of Observation Reports from \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_ and/or Emails and/or Texts from \_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_.

The amount below is being paid:

\_\_\_\_\_\_ $20 per Report \_\_\_\_\_\_\_\_ Additional Fees for Visits over 4 hours

\_\_\_\_\_\_ $50.00 Summary Report

The additional fee of $\_\_\_\_\_\_\_\_\_\_\_\_ is for Contact Log with texts and copies of Emails, or other requested correspondence. (This fee to be determined based on the amount of information being requested).

I am aware copies are given to Custodial, Non-Custodial parents and/or Attorneys. The payment is due prior to the release of the reports and correspondence. I am aware this request must be received in writing at least thirty (30) days before they are needed otherwise Rush Fees apply. Additional advance notice is required for all correspondence other than reports. If reports or other correspondence are needed in a rush situation additional fees will apply.

$ \_\_\_\_\_\_\_\_\_Rush Fee

***I am aware the reports must be requested within 90 days of visit and all reports and additional correspondence will be destroyed and not available if requested after this time.***

Signed:

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Custodial Parent Signature Date

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Non-Custodial Parent Signature Date

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Family Konnections Staff Date