

PRIVATE VISITATION REQUEST FORM

*This form **must** be used to request **each** visit, or no visit will take place. If your visit is terminated due to inappropriate behavior or actions, fees will not be reimbursee back to you.*

(If you have not received the "Private Visit Policy Overview", please request before a visit takes place).

Initial Contact Date:	Child Name:
NCP:	NCP No:
Requested Hours: Day:	Visit Date:
Time:	Guest Attending:
Second location in case of bad weather:	Address:
License Plate No:	Make, Model, Color & Year of vehicle:
Official Use (Do not write below this line)	Official Use (Do not write below this line)
Contacted CP On:	Email / Phone
Both parties confirmed: YES / NO / Denied	Visit Amount: Guest Amount:
Approved Supervisor:	Supervisor Number:

Private Visit Deadline: All private visit requests must be submitted to our office **before** 12 (noon) Wednesday, 2-weeks prior to your request visit date.

Private Visit Fee: All private visit fees are payable in cash, cash app(with % fee) or Zelle upon **first** arrival of the supervisor (NO EXCEPTIONS). Personal checks are not accepted. You are responsible for the cost of **ALL** entrance, meals, and entertainment fees. Supervisor should not pay for any out of pocket expenses.

Private Visit Location: Private Visits are to be held at one location, child will not be transported by supervisor, non-custodial or non-custodial relatives/friends. CPS, Officer or Therapist/Counselor fees will vary and are slightly higher.

Additional Supervisor: If an additional supervisor is needed, you will be responsible for both supervisors' fees. AHSV will determine all factors such as Violent Temperament, Flight Risk, More than 2 children, More than 2 guests, Sex Offender or Drug Use.

Mileage: A mileage fee may be assessed depending on distance of Private visit.

Guest: No guest will be considered the day of a visit. No guest will be allowed until after non-custodial party 4th visit with child (ren). There will be a criminal background check completed on each requested guest.

Guest Fee: A \$20.00 guest fee per person. All approved guest must present valid state-issued identification to the supervisor at each visit.

Severe Weather: If AHSV is informed of severe weather, visit may be cancelled and will need to be rescheduled at no cost to AHSV.

Alternate Location: If you have chosen a **Park** for your **Private visit**. Please provide a secondary location for issues such as rainy days.

Arrival: Non-custodial should be at the location 15-20 minutes prior to visit in addition should be set up before the children arrive. Please make sure to have supervisor cell number and call supervisor upon arrival.

Non-custodial signature: _____ **Date:** _____