



THIS AGREEMENT is made on ____/____/20____ (today's date), between _____ (parent's name) and the Central Visitation Program. For the purpose of this document, the parent (you) will be referred to as "parent" and Central visitation Program will be referred to as "CVP".

The parent, grandparent, or legal guardian signing this contract (you, the "Parent") agrees to comply with the following in order to have the opportunity to participate in the program with his/her children.

1. The parent will carefully read and initial a copy of the CVP "Program Rules".
2. The Parent will follow the "Program Rules" at all times. The Parent understand the if he/she breaks any of the Rules listed in the CVP "Program Rules" document, the Executive Director of CVP may immediately and automatically terminate the Parent from CVP. Parent agrees to stop participating in CVP's services if the Executive Director determines that any rules contained in the "Program Rules" has been broken by the Parent or their child(ren). Parent understands and agrees that he/she may be terminated from CVP at any time.
3. Parent waives certain rights to confidentiality he/she has or his/her child(ren) may have in order to successfully participate in CVP. The waiver of confidentiality may include: a waiver that permits any representative, volunteer, CVP staff member, Court Appointed Special Advocate, Guardian Ad Litem, a representative of the Department of Social Services, therapists, psychologists, psychiatrist, attorneys, or other professional assigned to the case to review any files retained by CVP. Parent also waives the right to confidentiality to allow any representative or volunteer of CVP to discuss facts concerning the Parent's child(ren) with any professional necessary.

The parent also understands and agrees that CVP will report any suspected or confirmed incidences of child abuse to the Department of Social Services. The parent waives the right to allege any claims against CVP that he/she may have if and when CVP makes a report of child abuse or neglect to the Department of Social Services.

4. Parent waives the right to allege any claims against CVP or any of its representatives (including staff members, board of directors, the executive director, volunteers, interns, or other employees) regarding negligence related to the use of the CVP grounds, facilities, and services.

5. If any part of this CVP Contract is found to be unenforceable or void for any reason by any court of law, that clause/portion/section will be considered separate from the remaining contract. In this event, all remaining clauses/portions/sections of this Contract shall remain enforceable.

6. This CVP Contract contains the entire agreement between the Parent and CVP and may not be verbally changed or terminated. This CVP Contract may only be reversed or changed in writing and the proposed changes will only be made permanent if the Executive Director agrees with the Changes and signs off on the changes witnessed by another person who is not a party of this CVP Contract.

7. This parent acknowledges that by signing this document they are giving CVP the permission to talk to and share documents with any professional (attorneys, GALs, CFIs, therapists, etc.) that may be involved in this case.

Signed and dated in front of this person conducting this client intake on _____/_____/20____ (today's date).

*NAME OF PARENT:

_____ (Print)

*ADDRESS:

_____ (Print)

*NAME(S) OF CHILD(REN)

_____ (Print)

* _____
 SIGNATURE OF PARENT

_____/_____/20____
 TODAY'S DATE

* _____
 SIGNATURE OF CVP EXECUTIVE DIRECTOR

_____/_____/20____
 DATE