



## Application for Supervised Visit

Once both parties have agreed about the supervised contact arrangements (location/time/date etc) please complete and sign this form and email it back to us with a copy of your **photo ID**. **Both parents must sign this form prior to commencement of the supervised visit.** It can be joined application or two separate forms. **We will not accept applications which are not signed and not agreed on the arrangements by both parties. PLEASE WRITE CLEARLY or TYPE IN THE INFORMATION.**

<u><b>Supervisor Use ONLY</b></u>	<input type="checkbox"/> Risk: Low / Medium / High <input type="checkbox"/> Do not disclose Mother's / Fathers address <input type="checkbox"/> Child's safety concerns Y/ N ..... <input type="checkbox"/> Parent safety concerns Y / N ..... <input type="checkbox"/> Court report required Y / N on date ..... <input type="checkbox"/> Notes Required Y / N Travelling: .....km \$..... <input type="checkbox"/> TOTAL Fee \$ .....
<b>Parent 1</b> <b>(With whom Child/ren reside)</b>  Country of Birth ..... Fluent in English: Y/N Employed: Yes/No Pensioner: Yes/No Disability:..... Self represented Yes/No	<b>Name &amp; Surname:</b> (mother/father)  <b>Address:</b> <input type="checkbox"/> Do not disclose my address to the other parent (put exclamation mark on a side)  <b>Mobile:</b> <b>Email:</b>  <b>Solicitor/Firm:</b> <b>Email:</b> <b>Phone:</b>
<b>Parent 2</b> <b>(Person being supervised)</b>  Country of Birth ..... Fluent in English: Y/N Employed: Yes/No Pensioner: Yes/No Disability: ..... Self represented Yes/No	<b>Name &amp; Surname:</b> (mother/father)  <b>Address:</b> <input type="checkbox"/> Do not disclose my address to the other parent (put exclamation mark on a side)  <b>Mobile:</b> <b>Email:</b>  <b>Solicitor/Firm:</b> <b>Email:</b> <b>Phone:</b>
<b><u>Court Orders</u></b>  <b><u>If there are Court Orders/ AVO/ Parenting Plan in place please provide us a copy</u></b>	Are there Court Orders/ Parenting Plan/AVO in place? ( <i>circle relevant</i> )  Date the last Orders/Plan/AVO was made ..... Next Court Date .....for .....  <b>Court Reports Required</b> Yes / No When is it required by ..... <b>Independent Children Lawyer</b> appointed/requested/not requested ( <i>circle</i> )
<b>Specify Safety concerns and why supervisor is requested</b>	

**Mother's initials:**  
**Father's initials:**



<b><u>Children Details</u></b>	<b><u>To be completed by the person with whom the child/ren reside!</u></b>
<p><b>Child 1 F / M</b></p> <p>Name .....</p> <p>DOB .....</p> <p>Age.....</p> <p>Speak English Yes / No</p> <p>Country of Birth.....</p> <p><b>!!! Are you comfortable for the supervised parent to take the child to the toilet (supervisor will be near by) or you prefer supervisor to take the children? (Please specify)</b></p> <p><b>!!! Are you comfortable for supervisor getting into supervised parent's car with the children and be transported by that parent (Please specify)</b></p>	<p>Who the child lives with? Mother/Father/.....</p> <p>How long since the child spoken or seen contact parent.....</p> <p>Current arrangements .....</p> <p>Specify any medical issues/ behavioural concerns/ safety concerns</p> <p>.....</p> <p>How would you describe your child's personality? .....</p> <p>What sort of play and toys/equipment does your child currently enjoy?</p> <p>How would you tell that your child is anxious or frightened?</p> <p>Has your child separated from you before and how did she/he react?</p> <p>Is child looking forward to seeing the other parent?.....</p> <p>Is there any other information that we need to know about your child (Dietary requirements; food allergies; medical info)?</p> <p>Anything specific you would like us to do when supervising?</p> <p>Was Independent Children's Lawyer appointed Yes / No / Awaiting one</p> <p>Name of Lawyer ..... Law Firm.....</p> <p>Phone ..... Email .....</p>
<p><b>Child 2 F / M</b></p> <p>Name .....</p> <p>DOB.....</p> <p>Age.....</p> <p>Speak English Yes / No</p> <p>Country of Birth .....</p> <p><b>!!! Are you comfortable for the supervised parent to take the child to the toilet (supervisor will be near by) or you prefer supervisor to take the children? (Please specify)</b></p> <p><b>!!! Are you comfortable for supervisor getting into supervised parent's car with the children and be transported by that parent (Please specify)</b></p>	<p>Who the child lives with? Mother/Father/.....</p> <p>How long since the child spoken or seen contact parent.....</p> <p>Current arrangements .....</p> <p>Specify any medical issues/ behavioural concerns/ safety concerns</p> <p>.....</p> <p>How would you describe your child's personality? .....</p> <p>What sort of play and toys/equipment does your child currently enjoy?</p> <p>How would you tell that your child is anxious or frightened?</p> <p>Has your child separated from you before and how did she/he react?</p> <p>Is child looking forward to seeing the other parent?.....</p> <p>Is there any other information that we need to know about your child? (Dietary requirements; food allergies; medical info)?</p> <p>Anything specific you would like us to do when supervising?</p> <p>Was Independent Children's Lawyer appointed Yes / No / Awaiting one</p> <p>Name of Lawyer ..... Law Firm.....</p> <p>Phone ..... Email .....</p> <p><i>*If there are more than 2 children please provide their details separately, please answer the same questions for all other children.</i></p>

**Mother's initials:**  
**Father's initials:**



<b>Date, Place and Time of the supervised visit/s MUST be agreed by both parents before the visit/changeover takes place and before you sign this agreement.</b>	<b>Start Date</b> ..... <b>Finish Date</b> .....
	<b>Start Time</b> ..... <b>Finish Time</b> ..... (Time of collection of child/ren) (Drop of)
	<b>Frequency</b> Weekly/Fortnightly/Monthly/Other.....
	<b>Number of Hours required per visit</b> .....
	<b>Location of Supervision/Changeover</b> ..... <b>Venue of Supervision/Changeover</b> .....
<b>Transport required</b> Yes/No	Pick up from..... Drop of to..... Car seat required Yes / No    Type and number of car seats required
<b>Please list all the people who can be present during supervision or write that you Do/Don't have an issue of others being present during the visit:</b>	
<b>Payment</b> Person responsible for payment of our service	Name/s..... Phone ..... Court ordered/By agreement (% or dollar amount of responsibility)
<b>How did you find us?</b> <i>(please circle)</i> Have you used any other supervision agency?	Google, Facebook, lawyer, friend, saw add, other ..... Yes / No    If Yes, Name of the Agency ..... Reason for changing agencies.....
Any further information that will assist us in organising and supervising the visit?	

By signing this application form **you agree** that all the information provided by you is true and correct to the best of your knowledge. You also agree that you have received, read, understood and signed Children in FOCUS's Terms and Conditions and agree to be bound by them.

Children in FOCUS is not able to negotiate between the parties. Therefore all the negotiations must be done by the parties themselves or via their legal representatives.

**DISCLAIMER**

1. I agree to indemnify and release Children in FOCUS and it's employees/contractors from any liability, including negligence, arising directly or indirectly out of my participation in services provided by Children In FOCUS.
2. I understand and acknowledge that this indemnity covers, but is not limited to, any liability arising out of or as a consequence, direct or indirect, of any harm, damage, loss, injury or death sustained by myself, my child or children or any attendees as a result of participation in activities or presence at a premises utilised by Children in FOCUS for the purpose of contact supervision, changeover and/or transport services.

Parent Name (mother) ..... Signature ..... Date .....

Parent Name (father) ..... Signature .....Date .....

**Mother's initials:**  
**Father's initials:**



## Fee Schedule

SERVICES	FEES
<b>*You can book our services for 1h or entire day</b>	
<b>Contact Supervision</b>	
Monday to Friday	\$69 per hour
Saturday	\$89 per hour
Sunday	\$99 per hour
Public Holiday	\$129 per hour
Supervised Changeover & Back	\$49 one way (at our location Meadowbank)
Supervised Changeover	\$50 one way + \$1.2 p/km from Meadowbank to your preferred location
Pre-contact visit child & parent meet supervisor/Intake session	\$99 (max 1h) Recommended so child feel settled and comfortable.
<b>Report Writing</b>	
Observational Notes (must be purchased each visit as we are required to write them)	\$19 for changeover \$39 for each visit
Detailed Court Report	\$150 for each visit
Subpoena of Staff member to Court	\$150 per hour (min 2 hours) that includes waiting time
Swear an Affidavit	\$69 if affidavit prepared by the requesting party \$139 if we prepare an affidavit
<b>Transport</b>	
Sydney Metropolitan Area (Pick up and drop off to and from the supervised location)	\$1 per km + \$traveling time
Outside Sydney Metropolitan Area	\$1.2 per km + \$ travel time
OTHER FEES (subpoenas, teleconferences, etc)	Other expenses may arise and quotes will be provided upon request

**Please Note:**

- Payment for the services must be made 1 week prior for the contact to occur.
- \*Prices may change at any time without notice, please refer to our web site for current prices  
[www.childreninfocus.com.au](http://www.childreninfocus.com.au) tel:0477993030
- If you wish to cancel or reschedule a booking, for any reason, you must **give us at least 24 hours notice for week days & by 5pm Friday for weekend visits** to avoid the late cancelation fee of 1 hour relevant to the day of contact. If our supervisor turns up to the visit and one of the parties does not bring the child or the visit is canceled for any reason we will deduct the no-show fee of 1 hour relevant to the day of contact.

**Please Direct Deposit to our bank account, put Your Surname and date of the visit you are paying for in the description field.**

**Children in Focus**

**BSB: 302 184**

**Acc: 123351**

**Mother's initials:**  
**Father's initials:**





## Terms & Conditions

At Children in FOCUS we aim to provide reliable, impartial and safe supervised visits between children and their loved ones. We strive for a stress free contact visits and changeovers. Our focus is on children's need's and safety. We believe that each child deserves meaningful, loving and positive relationship with each parent and significant others and we are here to make it happen in a safe and supportive way. This document sets out what you can expect from us and what we expect from the users of our services.

We require both parents/carers to enter into this Agreement with us (complete and sign the Application). We cannot provide services to families if one of the parties fails to sign and return the agreement to us. We can discuss any part of this agreement with you if you wish.

**You agree that location, venue, time and date of the visit, the activities, dietary requirements, sunscreen application and all other things must be agreed between the parties prior to signing this agreement and Children in FOCUS must be advised of it in writing as it is not our responsibility to negotiate between the parties. We are here to provide impartial supervision to ensure child/ren's safety and make factual notes.**

**Please note that the supervisor can not be responsible for administration of the medicine. All the medication administration arrangements must be made between the parents before contact occurs and needs to be in writing form either parent to Children in Focus.**

### Our responsibilities to you

#### We will:

1. Stay neutral and impartial at all times.
2. We will do our best to arrive on time (please be understanding if we are late due to traffic or other unforeseen circumstances).
3. Ensure safety of the child/ren at all times.
4. Constantly monitor conversations and observe all interactions between the children, parents and others by always being in the close proximity to the child and parent and making comprehensive notes.
5. Accompany parents and children everywhere, including to bathrooms and change rooms. We will intervene immediately in the event of inappropriate/unsafe conduct and terminate the contact visit and returning the children to their carer/parent if necessary.
6. Provide feedback to the primary carer if specifically asked that is appropriate and relevant to the child's care and not invade confidentiality of the other parent.
7. Assist & Guide parents with the care of children when they are failing to respond to the child/ren's needs and safety.
8. Support parents and children to facilitate a positive and safe interaction.

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**Father's initials:**



9. Prepare comprehensive report about the supervised visit including time, date, who attended, what activities took place, conversations, interactions, behaviour displayed by children and discipline techniques implemented. Such reports can be used in Court.
10. All information provided to us by either party is confidential and will not be disclosed unless both parties provide us with written permission to realise the information.
11. We provide contact visits and changeovers at a location that suits both parents and can also recommend an age appropriate, safe & practical venue at the time of booking. To ensure that each visit is safe and meets each child's needs we require **1 supervisor per 3 children ratio**. Additional supervisor will need to be booked and paid for if you have more than 3 children. Children under 12 months require their own supervisor.

### **Our Expectations of Parents**

12. Take all the necessary steps to facilitate smooth occurrence of the supervised contact for the other party. Sign the Agreement and return to us as soon as possible.
13. Be on time and be polite and respectful with our staff and others involved in the contact.
14. Be prepared for visits: bring healthy food/snacks and drinks for your child/ren and be mindful of any allergies of your and other children.
15. Bring toys, books, colouring books and games to play with your child.
16. Ensure you have sufficient funds to pay for yourself, your child/ren and the supervisor to enter venues if relevant.
17. Do not bring third parties to visits unless prior consent is obtained from the other parent and we have agreed.
18. Follow directions of your supervisor and do not engage in lengthy conversations with your supervisor in the presence of children and do not discuss your family law proceedings with the supervisor.

### **Termination of Visit**

19. At Children in Focus, the children's safety and well-being are paramount. We will immediately terminate the supervised visit, if in our view, it becomes too stressful or traumatic for the child. Such situations include but not limited:
  20. Discussing Court proceedings with the child or in the presence of the child.
  21. Speaking negatively about the other parent, your child/ren, our staff or other family members in the presence of the child/ren.
  22. Verbally or physically abusing child, supervisor or others.

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23. Acting aggressively or abusively towards supervisor or others and failing to comply with directions of the supervisor.
24. Threatening your child/ren with physical discipline.
25. Smoke or consume alcohol in the presence of your child/ren.
26. We will not commence the contact visit if any of the family members are deemed to be under the influence of alcohol or drugs.

### **Cancelling or rescheduling the visit**

27. If you wish to cancel or reschedule a booked supervised contact, for any reason, you must give us at least 24 hours notice for week days and by 5pm Friday for weekend visits to avoid the late cancelation fee of 1 hour relevant to the day of contact. If our supervisor turns up to the visit and one of the parties does not bring the child or the visit is not going ahead other than by our fault we will deduct the no-show fee of 1 hour relevant to the day of contact.
28. Repeated cancellation of visits or not bringing children to the scheduled visits/ as per court orders may lead to suspension of our services and solicitors and ICL will be informed of reasons for our decision.

### **Terminating this Agreement**

Children in FOCUS may terminate this Agreement at anytime without notice if:

29. There is a repeated failure to pay fees.
30. One of the party being obnoxious and abusive towards the staff.
31. There are repeated breaches of the Terms of this Agreement.
32. We are unable to meet the specific needs of your child/ren or family.
33. We are concerned that visits are not in the best interest of your child/ren.
34. You may terminate this Agreement by giving Children in FOCUS 48 hours notice in writing.

### **Enquiries**

In Children in FOCUS we are committed to making your experience with our services as pleasant as possible. If you have any questions please direct all your enquiries in writing to the management or call us during business hours. Do not discuss any issues with the supervisor during the visitation hours. Our management team will deal with any concerns raised in respectful and efficient matter. Please be respectful to our staff as we are here to help you.

Please sign the Agreement (Application) and send it back to us as soon as possible so we can make an assessment whether we can be of the assistance to you and your child/ren. We will notify you of our decision by phone or in writing within 48 hours.

**Mother's initials:**  
**Father's initials:**

