

Arizona Family Connections, LLC  
9117 W Grand Ave,  
Peoria, AZ 85345  
P: 480-764-6689  
E: Azfamilyconnections@outlook.com  
www.Azfamilyconnections.com

Date \_\_\_\_\_ Custodial \_\_\_\_\_ Visiting \_\_\_\_\_ Guardian / Other \_\_\_\_\_

### **Agreement for Supervised Visitation / Monitored Exchanges**

#### **This is an agreement for:**

\_\_\_\_\_ Supervised Visitation \_\_\_\_\_ Monitored Exchange \_\_\_\_\_ Child Transportation

made between Arizona Family Connections and Parents identified below, regarding visitation of the child/ren identified in Interview document.

Custodial Parent:

Visiting Parent:

Who is responsible for payment?

Who is responsible for transportation?

#### **General Consents**

I consent to Supervised Visitation (SV) and/or Monitored Exchange (ME) services with Arizona Family Connections. The entirety of this contract is a legal and binding agreement. I agree to the following Terms and Conditions of SV provided in this document. I have received an Orientation to SV / ME services.

#### **Guidelines**

I have received a copy of the SV Guidelines and agreed to adhere to all of the rules and requirements set forth. I understand that failure to comply with any Guideline is grounds for Termination of visit and/or SV / ME services.

If services are placed on Hold, you will be required to complete a Re-Orientation session before services are resumed.

\_\_\_\_\_ Initial

**Confidentiality/ Release of Information**

I understand that Court ordered services, such as SV or ME, are not protected by confidentiality laws. I understand that mutually agreed upon SV or ME also limits confidentiality of SV and ME documentation. The Monitor will be required to make a report of information obtained throughout interview, orientation, visits and/or exchanges, copies will be sent to:

- The Court
- Attorneys of record, if applicable
- Minor Counsel, if applicable
- Social Worker/s, if applicable
- Custodial Parent
- Other requesting party, if applicable

I understand that these other parties who are receiving information may not keep my confidentiality and that the Monitor does not have control over this.

I hereby authorize the use or disclosure of information regarding my Supervised Visitation services as specified above. This authorization permits disclosure of information about my visits, including interaction with my children, monitor and other parent.

\_\_\_\_\_ Initial

**Liability and Disputes**

I agree to release, hold harmless and indemnify Arizona Family Connections, and any / all staff for any claims arising from the performance of this Agreement. Should performance of Arizona Family Connections be interrupted by any occurrence which is beyond the control of Arizona Family Connections, Arizona Family Connections, shall be excused from performance of its obligations and undertakings, so long as such condition continues in existence.

I understand there are benefits and risks to services. I hold Arizona Family Connections, employees, contractors and associates harmless and not liable for the actions of other parent or for incidents or injuries that occur during visits or related services. I agree to manage any disputes: first, with the Monitor directly; then if not resolved, with a Supervisor at Arizona Family Connections; and if not resolved, through neutral binding arbitration instead of Court process. Arbitration is a less formal and more private method of handling business disagreements. In the event of an Arbitration, each person/ representative of the parties will pay for their own legal counsel. Any party named in the arbitration will split the fees of arbitration.

\_\_\_\_\_ Initial

I understand that all staff of Arizona Family Connections, are mandated reporters. This means that any suspected child or elder abuse will be reported to the appropriate authorities.

\_\_\_\_\_ Initial

I understand that issues related to safety, including possible abduction, driving under the influence, threats, etc. will result in suspension (Hold) or Termination of visit and/or services and a call to Police to ensure child, monitor and public safety.

\_\_\_\_\_ Initial

I understand that my inability or unwillingness to follow guidelines will result in suspension (Hold) or Termination of visit and/or services. I understand this includes trying to interfere with visits, attempting to get Monitor to “side” with me, and/or failure to cooperate with Monitor. I understand that Monitor is a neutral third party who is there to ensure safe visits between non-custodial parent and child/ren.

\_\_\_\_\_ Initial

I have received a copy of the Concern Form so that I can address issues related to SV with Monitor without having to bring the topic up in front of the child/ren.

\_\_\_\_\_ Initial

I understand that other parent is the parent during parenting time. His/her parenting time may include photography except in the case of suspected sexual abuse perpetrated by Visiting Parent against Child / ren. Visiting parent is not allowed to record via audio or video during visitation. If visits are recorded, this can result in termination of services.

\_\_\_\_\_ Initial

I understand that Arizona Family Connections will make every effort to establish a regular schedule, but there is no guarantee of time slot if there is a missed visit.

\_\_\_\_\_ Initial

I give Monitor permission to transport child/ren for visits. This may include transportation to or from a visit for exchange of custody time or during a visit for community activities.

\_\_\_\_\_ Initial

I will not bring a contagious person (myself, my child, anyone else, etc.) to a Visit.

\_\_\_\_\_ Initial

I will not argue with Monitor. I understand that all concerns, complaints and/or issues will be handled with a Supervisor during regular business hours. I understand that I may be required to submit my concern via Concern form.

\_\_\_\_\_ Initial

I understand that the document produced by the Monitor after the Visit is the extent of communication that will be had regarding the Visit. While Arizona Family Connections, desires that both Parents are completely happy with services, Arizona Family Connections, is limited to discussing only matters related to the safety and wellbeing of the children and to scheduling concerns. Desires to question the details of who said what, when and how shall be directed to the party'ss attorney and/or to the Mediator. I understand this is necessary to avoid Monitor's bias, or appearance of bias. The Monitor is a neutral third party.

\_\_\_\_\_ Initial

### **Fees**

If fees are split between Parents, both must agree, comply and pay applicable fee for visits to happen. Monitor WILL NOT dispute payment arrangements between Parents on behalf of either Parent. Monitor is not a personal banker nor a go-between for Parents.

I agree to pay Arizona Family Connections for services related to SV and/or ME. I have read and agree to the additional polices including cancellation rules in the Guidelines document. I understand that if I cancel a visit for any reason, I will be responsible for that fee.

I understand that Arizona Family Connections is not a grant-funded / free public service agency. Fees are billed for services provided (similar to an attorney, nail salon, or plumber, etc.). Placing unreasonable demands upon Monitor and/or other Arizona Family Connections staff without notice and/or payment will result in a Hold or Termination of services.

\_\_\_\_\_ Initial

I understand the fees are as follows:

### **Note: Fees are subject to review and adjustment.**

Sometimes additional staff or security is necessary and the party responsible for payment will be required to pay this additional fee.

- Severity of case: risk factors, etc.
- Number of children to be supervised
- Other factors that may warrant extra caution.

## Initial Interview

- \$120 requesting parent one-time fee, prior to visits
  - Your interview or visit will not be scheduled until payment is received and cleared.
- Interview / orientation fee is for administration time in gathering and reviewing information.

## Monitored Exchanged

- \$ 40 per 15 minutes exchange within 5 miles of AFC office
- \$60 per 15 minutes exchange outside of the 5-mile radius

## Visits

- \$60 for 1-2 children per hour
- \$80 for 3-4 children per hour
- Monitored Exchange for visits is included in this price
- travel fees are currently included in this price

*\*Visitation hour is 60 minutes based on appointment time; NO time credit given for late arrival by either party*

## No Shows

\*Refunds will not be provided for no show appts.

## Payment Method

Cash is NOT accepted. Please do not attempt to pay Monitor via cash. Invoices for payments will be sent through Quickbooks. You may pay via CashApp, Zelle, Venmo or [www.azfamilyconnections.com](http://www.azfamilyconnections.com) payment link. You are responsible to pay any fees associated with online payment. You may NOT deduct the electronic transaction fee from the fee paid to Monitor. Fees for insufficient funds will be paid by the responsible party.

Fees for services must be paid in full **by 12:00pm the day before** the visit, unless the visitation is on a Saturday, Sunday or Monday, then payment is due the Friday before. Please schedule your payments in a timely fashion. There are no refunds. Failure to provide payment in advance may result in loss of scheduled visit time. There are **no exceptions** to this rule. Payment must be received and cleared in advance.

If payment is not made, your time slot may be given to another family and you may not be able to get it back, depending upon Arizona Family Connections staff availability.

## **Travel Time**

There is no travel fee for appointments in Phoenix Metro Area unless Monitor provides transportation for child/ren (see below).

Monitor's travel fees for outlying areas are:

- Maricopa, Queen Creek, San Tan, Apache Junction- \$75, round trip

*\*Payment of travel time should be provided by Parent identified in Court document as responsible for transportation.*

## **Child Transportation**

If Monitor provides transportation for child (ren), Monitor's travel within Phoenix Metro city limits is \$40 round trip (pick up and drop off at Custodial Parent's home or other location within Phoenix city limits).

## **Holiday Fees**

- \$95 for each clock hour visits on the following days, subject to availability:

- New Year's Eve and Day                      Dec. 31 and Jan. 1

- Memorial Day                                      May- last Monday

- Independence                                      July 3, 4, and 5

- Labor Day    September- first Monday

- Thanksgiving                                      November- fourth Thursday, plus Wed before and Friday after

- Christmas    December 24, 25, 26

*When a holiday falls on a Saturday, it is usually observed on the preceding Friday. When the holiday falls on a Sunday, it is usually observed on the following Monday.*

*Please ask for specifics as holidays approach.*

## **Additional Services and Fees**

- Child transportation fees- see Travel fees

- \$10 for print and mail service, per occurrence (if you do not want to, or you cannot receive, your visit notes via email)

- \$50 for clock hour for consults with social worker, attorney, and/or other approved individual, billed in 15- minute increments. Payable by next visit or within 7 calendar days, whichever is sooner.

- \$50 per clock hour for written report (Court summary report, outside agency report, parent Warning, Hold or Termination notice).

- \$350 for each half day (each 4-hour block) Court appearance per Monitor.

- \$50 per clock hour for preparation for Court appearance (case review, staff time, etc.).

- \$50 per clock hour for travel time to Court appearances.
- Each Parent is responsible for fees associated with his or her own attorney or other representative. The party (side) who calls the Monitor(s) to appear is responsible for the associated fee. In the case of a Monitor speaking with a Mediator, both Parents will be billed equally for half of the fee.

\_\_\_\_\_ Initial

### **Acknowledgement**

I have read and agree to the Terms and Conditions of receiving Supervised Visitation and/or Monitored Exchange services.

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

Signed \_\_\_\_\_ Date \_\_\_\_\_

Arizona Family Connections, LLC.

Name: Deana Stewart

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



