A Children's Studio
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REQUEST TO CHANGE/ CANCEL VISITATION

As stated in the signed "Agreement for Services," visitations are mandated by the Court and are set. However, either party can request an emergency change. Emergency changes in the schedule **must be requested via this form, approved by both parents within 24 hours of the scheduled visit and approved by the Provider**. Any other change must be made **one week prior to visitation** in accordance with the Agreement for Services. All change requests are to be personally submitted to the Visitation Monitor via email. The Visitation Monitor will confirm cancellations.

*If a cancellation notice is given to the Visitation Monitor more than 24 hours before the scheduled visit, there is no cancellation fee. However, if notice is given to the Visitation Monitor with less than 24 hour notice, cancellation fees apply. Cancellation fee is equal to the scheduled visit fee.

I, ____, Custodial Parent (CP) or Non-Custodial Parent (NCP), am requesting that the Professional Supervised Providers Visitation date/time originally scheduled with my child/ren ____, for

Date: ____ Time: _________________________________ be changed as follows:

CHANGED TO:

Date: ____ Time: _________________________________

REASON: ____

Signed by Parent: ____

CP _____________ NCP ___________ Dated: ______________________

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I agree and acknowledged that change: __________ I disagree with the change: __________ Date:_________

REASON:

____

Signed by Parent: ____ CP __________ NCP ___________