Family Visitation Services BC.com

(778) 791-7712 | info@familyvisitationservicesbc.com
familyvisitationservicesbc.com

Intake Form

Each parent or guardian fills out their own form and emails it to info@familyvisitationservicesbc.com. You don't need to coordinate with the other parent; we contact them separately.

Next steps: once we have both forms, we book a short intake call by phone with each parent. Nothing is paid before the intake call. The $150 intake fee covers both parents and is invoiced with the first visit. Each parent signs our service agreement at intake, then we schedule the first visit.

Please send with your form, or before your intake meeting: a copy of the court order or written agreement, and any protection or no-contact order.

1. About you

I am the	☐ Parent/guardian with day-to-day care ☐ Visiting parent/guardian ☐ Other: _____		
Full legal name		**Relation to child**	
Phone		**Email**	
City		**Best time to call**	
Language		**Interpreter needed?**	☐ Yes ☐ No

2. Other parent or guardian

Full name		**Relation to child**	

We will not share your information with the other parent. They fill out their own form.

3. Child(ren)

Full name	Date of birth	Allergies, medical or behavioural needs, comfort items

4. Court order and visits requested

Court order or written agreement?	☐ Yes ☐ No	**Court file no. / date of order**	
Service needed	☐ In the community (park, library, rec centre) ☐ In-home (visiting parent's home) ☐ Virtual visits ☐ Exchanges only (drop-off / pick-up)		
Schedule requested or ordered	Days, times, length:		
Conditions in the order	For example: no alcohol, no photos, who may attend:		
Preferred start date		**Supervised visits before?**	☐ Yes ☐ No With whom:

5. Safety

Is there a protection order or no-contact order, now or in the past?	☐ Yes ☐ No
Any safety concerns for the child(ren), the other parent or staff during visits?	☐ Yes ☐ No
Could anything (for example, substance use) make a visit unsafe?	☐ Yes ☐ No
Is there an open file with MCFD or a Delegated Aboriginal Agency?	☐ Yes ☐ No

If you answered yes to any question, please explain. Also note anything else we should know (culture, language, routines):

6. Getting to visits

Who brings / picks up the child(ren)?		**Phone**	
Vehicle, colour, plate		**Emergency contact (name, phone)**	
Others allowed to attend			

Supervisors do not transport children. Visits: public places, video, or the visiting parent's home if the order or both parents allow it and FVS approves.

7. Lawyer and reports

Your lawyer (name, firm)		**Phone / email**	
Other professionals (social worker, counsellor)			
Report needed	☐ Summary (attendance, times, incidents) — no charge ☐ Detailed (full factual account, often for court) — $50 ☐ As the order requires		
Send reports to	Name, role (lawyer, social worker…), email. Reports are only released to people allowed by the order, the referral or the law.		

8. Fees and who pays

Rates: intake $150 total (both parents) | supervised visit or exchange $90/hour | detailed report $50 | summary report no charge. The intake fee is invoiced with the first visit. Visit fees are paid before each visit.

Who pays?	☐ Me ☐ Other parent ☐ Split 50/50 ☐ As the court order says

9. Consent and signature

By signing, I confirm that:

- the information in this form is true and complete, and I will tell you promptly if anything changes (contact details, court order, safety);
- I understand both parents must complete a form and an intake before visits begin, and that this form does not guarantee service;
- a supervisor will observe the whole visit and may end it if anyone is unsafe or rules are not followed, and visits may be cancelled if I am late, absent or impaired;
- a factual report is prepared after each visit and shared only as allowed by the order, the referral or the law, and staff must report any concern that a child needs protection;
- I consent to Family Visitation Services BC collecting and using this information to arrange and supervise visits, and I agree to pay the fees I am responsible for under the service agreement I will sign at intake.

Signature		**Date**	
Print name			