

SPECIAL ARRANGEMENTS

Please complete section if applicable

CHILD'S NAME: _____

CUSTODIAL/VISITATION/PICK-UP ARRANGEMENTS:

COPY IN FILE ____ (In order for us to honor these requests, a copy must be on file in the office).

ORDER OF PROTECTION: _____

COPY IN FILE ____ (In order for us to honor these requests, a copy must be on file in the office).

OTHER: _____

Please turn over →