

B. Basic Visitation Schedule

Mother

The children will spend time with their mother according to the following schedule:

- | | | | |
|-------------------------------------|----------------------------------|--|---------------------------------|
| <input type="checkbox"/> Mondays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Tuesdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Wednesdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Thursdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Fridays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Saturdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Sundays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |

Father

The children will spend time with their father according to the following schedule:

- | | | | |
|-------------------------------------|----------------------------------|--|---------------------------------|
| <input type="checkbox"/> Mondays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Tuesdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Wednesdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Thursdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Fridays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Saturdays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |
| <input type="checkbox"/> Sundays | <input type="checkbox"/> All Day | <input type="checkbox"/> From _____ am/pm to _____ am/pm | |
| <input type="checkbox"/> Every week | | <input type="checkbox"/> Week 1 | <input type="checkbox"/> Week 2 |
| <input type="checkbox"/> Week 3 | | <input type="checkbox"/> Week 4 | <input type="checkbox"/> Week 5 |