AFFIDAVIT GRANTING VISITING RIGHTS AND PRIVILEGES (ADULT)

Resident name:	KDOC#:
I.	, being the biological parent or legal guardian with primar
legal custody of said minor child(ren) listed b	, being the biological parent or legal guardian with primar elow*:
Full name of child	Date of Birth
Full name of child	Date of Birth
Full name of child	Date of Birth
Full name of child	Date of Birth
Full name of child	Date of Birth
Do hereby give temporary custody to: for the purpose of bringing the child(ren) to a	
Signature of biological parent or legal guardia	an Date
	ship must accompany this affidavit.
State of(County) of	
Signed or attested before me on (date)	by
	Notary Signature
Notary Seal	Date
Title and Rank	
My appointment expires:	