



CIPRIANI PLACE  
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### Children's Waiting Room Parent /Guardian Information and Agreement Form

While my child is in the Family Court Children's Waiting Room, I agree to adhere to the following terms and conditions:

1. I accept that the Children's Waiting Room is set up and intended only as a waiting area for my child/children while I attend to matters in the Family Court.
2. To keep the Children's Waiting Room staff aware of my location in the building at all times.
3. I accept that I am to retrieve my child/children from the waiting room before leaving the building.
4. I accept that if I do not retrieve my child/children before leaving the building the appropriate authorities will be contacted and my future right to use the Children's Waiting Room will be jeopardized.
5. Light snacks are provided for children. Therefore I accept that if my child/children has any food allergies or is on a restricted diet, it is **my responsibility** to inform the Day Care officers of such. I also accept that it is **my responsibility** to provide meals for my children.
6. I understand that it is **my responsibility** to inform the Children's Waiting Room Staff if my child/children is on any type of medication. I accept that the Children's Waiting Room staff will not medicate children under any circumstances; therefore, I accept that if my child/children is on medication that it is **my responsibility** to administer such medication at the prescribed schedule.
7. The Children's Waiting Room staff is concerned for the safety of all children under their supervision. If my child/children poses a threat to him/herself or others or is behaving in an inappropriate manner, I understand that I will be required to immediately retrieve my child/children at the request of the Waiting Room staff.

8. I understand that if my child has any disabilities or special needs I am required to inform the Day Care Officers of such needs before coming to court or upon registration, I understand that the Children's Waiting Room Staff are willing to assist me in the supervision of my child/children and to assist in providing my child/children with the specific care they may require.

I have read, understand and agree to each of the terms and conditions set forth in this document, and agree **Not** to hold the Children's Waiting Room, The Family Court of Trinidad and Tobago, its officers, employees, servants and or agents, accountable for any and all claims, losses, liabilities or damages, arising or resulting from the performance of this agreement.

Print Name \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I attest that I have explained the agreements to the above-signed individual, and the individual has indicated to me that he/she understands the conditions set forth in this document.

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_