

**MDHS/DYS Training School
Oakley Campuse
Youth Visitation Form – XV.3.B**

Youth's Name _____ **Date** _____

Housing Unit _____ **Time in/out** _____

VISITOR'S NAME	RELATIONSHIP	TYPE OF I.D.
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I have received a copy of the MDHS-DYS Training School Visitation Rules and Regulations. I have read and understood the visitation rules and regulations.

I understand that I may not possess any weapon or any object that can be made into a weapon; knife, cell phone, alcoholic beverage, drug, sexually explicit or obscene material, or any other forbidden items while on DYS property. I agree that I will not give any of the above items to any youth at a DYS facility, nor any other contraband, including but not limited to, cigarettes or other tobacco products, matches, lighters or money. I understand that if I violate any of the above prohibitions or any other rules of the facility that I may be denied future visits to the facility and may be referred for prosecution, which could result in my imprisonment.

As a condition of my admittance to the facility, I consent to a search of my person, and any minor child accompanying me, by means of a frisk or pat down or by use of a mechanical device. I understand that if I refuse to submit to any search that I will be refused admission to the facility. I understand that handbags, briefcases, and packages are prohibited.

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Visitor's Signature

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Visitor's Signature

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Visitor's Signature

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Visitor's Signature

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DYS Staff Witness