

Signature Page

Your name signed on the line below means you fully understand your rights, have reviewed this Handbook and had your questions answered.



Childs Signature: _____	P.S. Initial: _____	Date: _____
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RIGHTS HANDBOOK

Signature Page

Confirmation
of Receipt of Rights

This Book Belongs to: _____



72 Orchard Drive
Belleville, Ontario, K8P 2K7
613-968-8569 | Fax 613-967-3998

Rights

I had the following rights explained to me:

- **Healthy food and a safe home**
- **Go to school and enjoy making friends**
- **Clothes for every season**
- **Medical and Dental care**
- **Services for any special needs**
- **Fun activities in the community**
- **Attend Cultural, Religious, Language Isolation and Sexual Orientation activities**
- **Participate in your Plan of Care - Know what information we collect and keep in your file**
- **Visit family (unless a judge orders)**
- **Speak privately with a lawyer, Ombudsman, Advocate, Member of Parliament**
- **Send and get mail privately unless it might be harmful to me**

- **Privacy, Personal belongings and space**
- **I want to transfer homes, what can I do? An advocate will help you to contact the Residential Advisory Committee (RPAC) in your area. The RPAC committee would review your placement and talk to you about your reasons for requesting a transfer. Having reviewed all of the information they will make a recommendation regarding your placement. Phone #1-800-263-2841**

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