
50/50 Custody Agreement Template

Parent Details

- Parent 1 Name: _____
- Address: _____
- City, State, ZIP: _____
- Contact Number: _____
- Parent 2 Name: _____
- Address: _____
- City, State, ZIP: _____
- Contact Number: _____

Child Information

- Child's Full Name: _____
- Birth Date: _____
- Current Living Address: _____

50/50 Custody Schedule

Week	Parent 1 Time	Parent 2 Time	Remarks
1	_____	_____	<input type="checkbox"/> Confirmed
2	_____	_____	<input type="checkbox"/> Confirmed
3	_____	_____	<input type="checkbox"/> Confirmed

4	_____	_____	<input type="checkbox"/> Confirmed
5	_____	_____	<input type="checkbox"/> Confirmed
6	_____	_____	<input type="checkbox"/> Confirmed
7	_____	_____	<input type="checkbox"/> Confirmed
8	_____	_____	<input type="checkbox"/> Confirmed

Responsibilities

- Health Care: Parent 1 Parent 2 Joint
- Schooling: Parent 1 Parent 2 Joint
- Extracurriculars: Parent 1 Parent 2 Joint

Signatures

- Signature (Parent 1): _____
- Date: _____
- Signature (Parent 2): _____
- Date: _____