

Whereas, being dedicated to your well-being, I/we want to provide a foundation for your successful independence, assist you as you develop your abilities to be self-sustaining and ensure that you have every opportunity for happiness: and

Whereas, recognizing your strength to embrace with eagerness all things new; I/we want you to be aware of the risks associated with substance abuse; provide you with the resources to make good decisions for yourself and empower you with the security of a healthful life.

Now, therefore, as your parent(s) or guardian(s), I/we agree to:

Tell you about the dangers and risks of substance abuse and their adverse impact on your future.

Assist you in developing appropriate responses to your peers and others who encourage you to experiment with drugs, alcohol or tobacco.

Adopt firm rules and clear limits in order to protect you and update them when necessary.

Be consistent in the rules' application and enforce fair consequences for their violation.

Listen to you when you talk and answer your questions honestly.

Set aside time for you and create family rituals.

Get involved in your education and encourage you to excel in healthy and creative activities.

Know your friends, and know your friends' parents.

Call parents whose home is to be used for a party to ensure that there will be adult supervision.

Make it easy for you to leave a party where alcohol and drugs are being used.

Set the right example by not smoking, drinking in excess or using illicit drugs.

Set the right example by not abusing prescription medications or over-the-counter drugs.

Expect good behavior and be sure to acknowledge it.

Pledge to appreciate and respect you, demonstrate my/our love for you and value our time together.

Signature _____ **Date** _____

Signature _____ **Date** _____

Whereas, I appreciate how much you love and care for me and I do not want to disappoint you; and

Whereas, I know life is full of opportunities and choices and it makes sense to stay drug-free in order to achieve my goals and ultimately, be successful and happy.

Now, therefore, as your child, I agree to:

Choose not to use/abuse prescription medications or over-the-counter drugs.

Choose not to use tobacco, cigarettes, alcohol or illegal drugs and not permit others to do so in my car or house.

Choose not to use prescription medications or over-the-counter drugs unless a doctor tells me to.

Not get in an automobile when the driver has used/abused drugs, alcohol or tobacco products.

Tell you where I am going, what I am doing, who I will be with, when I will be home and check in with you at regular times.

Talk to you when I have questions and concerns and listen to what you have to say.

Take responsibility for my choices and actions.

Respect and obey the rules you set and enforce.

Set a good example for my friends, siblings, and others by getting involved in activities that do not involve drugs, alcohol or tobacco.

Signature _____ **Date** _____

Signature _____ **Date** _____