

SAFE HOMES PARENT PLEDGE FORM

STUDENT NAME(S)

SCHOOL NAME

GRADE

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SAFE HOMES parents agree to a healthy atmosphere in which the use of alcohol and other drugs is no longer the “norm.” **SAFE HOMES** parents are taking a stand against the alarming increase in alcohol and drug use among our youth.

PARENT PLEDGE

- *I will not serve, nor will I allow, youth under the legal drinking age of 21 to consume alcohol in my house or on my property.*
- *I will not allow parties and gatherings when I am not at home.*
- *I will not allow the use of illicit drugs at my home or on my property.*

THE FOLLOWING FIELDS ARE REQUIRED FOR PARTICIPATION:

PARENT NAME(S): _____

EMAIL ADDRESS (REQUIRED): _____

ADDRESS: _____

HOME PHONE: _____ **CELL PHONE:** _____

(Parent Signature)

(Date)

Your signature indicates your consent to have your name, address and phone number(s) appear in a secure online directory. It also indicates that your best efforts will be made to implement the guidelines of SAFE HOMES. This is not a legally binding contract.

Please mail or fax this form to:

SAFE HOMES AtoZ DIRECTORY
c/o Ridge High School
268 South Finley Avenue
Basking Ridge NJ 07920

Fax: 908-204-2582