

## **Contract**

Participating in the Appalachia Service Project is a wonderful missionary experience that builds awareness, responsibility and community spirit. Each year we receive permission from ASP, Inc. for our continued involvement and that depends, in part, on our previous year's conduct. We want each parent and volunteer to understand the basic ASP regulations prior to committing to this project.

Please check boxes next to each statement indicating you have read, understand and agree to its intent and then sign below. Note: "I" refers to the teenage volunteer. Parent's checkmark indicates that the parent is aware of these expectations.

<u>Teen</u>	<u>Parent</u>	
		I understand that participation in ASP requires a year-long commitment. I agree to participate in all fundraisers, service hours and workshops unless my absence is pre-approved and make-up hours are completed in a timely fashion.
		I will abide by each of the following ASP rules: No drug or alcohol.  No sexual harassment. I will follow center guidelines, including lights out & quiet time, proper attire and any other guidelines that may specifically apply. I will fully participate in all center activities: meals, gatherings, devotions, etc.
		I agree to cooperate fully with center staff and all adult advisors.
		I understand that this is a work project, that adequate rest and mutual respect are essential for safety reasons and for the accomplishment of our best efforts in helping those in need.
		I understand that failure to abide by these guidelines could result in ASP, Inc. refusing Cohasset ASP's future participation. Inappropriate behavior will be addressed immediately and, if uncorrected, could result in the volunteer being sent home at the parent's expense.
Teen Volunteer Signature		ature Parent/Guardian Signature

Please complete and mail or deliver this form to : Cohasset ASP, 43 Highland Avenue, Cohasset, MA 02025.