

HOME SAFETY NETWORK AGREEMENT

In support of our community's effort to provide a safe environment for our teens to socialize, I/we;

Parent(s) or Guardian name(s)

would like to have my name added to the NSHSN directory and realize that by doing so I am agreeing to:

- Be present or provide responsible adult supervision for teenage parties that are held in my home;
- Not serve alcohol or allow guests under the age of twenty-one to consume alcohol in my home or on my property, in compliance with Massachusetts law; and
- Not allow the use of illegal drugs in my home or on my property

Signature(s)

Address:

Phone:

Email:

Please check one:

NSHSN may publish my contact information in a NSHSN directory and/or webpage

I do not wish to have my contact information made public

Please send completed forms to:

Ann Taggart
23 Carriage Hill Rd.
Northborough, Ma. 01532

Note: This is not a legal document but a pledge of support.