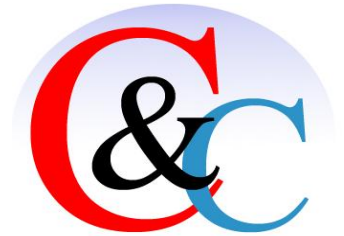




KATHLEEN M. RICE  
DISTRICT ATTORNEY



OFFICE OF THE DISTRICT ATTORNEY  
NASSAU COUNTY



*Choices and Consequences*

## Contract For Safety

This contract is to be signed by two people, of any age, who feel they can make a commitment to help each other stay safe. Each partner should keep a copy of the contract in a secure place.

I know that alcohol and other drugs can affect my ability to drive or walk safely. If I am ever under the influence, I will not drive or walk outside alone and I will not ride with a driver who is reckless or who has been drinking or taking other drugs. I will also attempt to stop another person from driving or walking if I know they are under the influence.

I know that I can call you for assistance regardless of the time or circumstances, no questions asked. I agree to take these actions to stay safe and I agree to help you stay safe. Our relationship is worth it.

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

**Tel#** \_\_\_\_\_

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

**Tel#** \_\_\_\_\_