



Coalition Involvement Agreement

Approved August 27, 2014

This Coalition Involvement Agreement (CIA) is Vashon Alliance to Reduce Substance Abuse (VARSA)

and _____ shall be from: _____ / _____ / _____
[Member's Name] [Start Date]

General Membership Sector Leader _____
[Sector]

Full Name: _____

Organization: _____

Address: _____

Preferred Phone: _____

Preferred Email*: _____

The best way to reach me is: Email Voice message Text Other _____

Are you under age 21? Yes No

1. VARSA will be held responsible to:

- 1.1. Create and follow By-laws, Code of Conduct, Confidentiality and Ethics, and Policies & Procedures.
- 1.2. Formulate coalition goals and objectives.
- 1.3. Oversee operations of activities, programs, and paid staff.
- 1.4. Continue to seek new membership of the coalition.
- 1.5. Create and follow a strategic action plan.
- 1.6. Create a credible and relevant sustainability plan that includes volunteer membership and resources, both financial and material.
- 1.7. Respect the rights of VARSA members to hold their own opinions and beliefs.



2. _____ will be held accountable for:

[Member's Name]

- 2.1. Supporting the coalition's mission and vision.
- 2.2. Adhering to VARSA By-laws, Code of Conduct, Confidentiality and Ethics, and Policies & Procedures.
- 2.3. Acting as a positive role model for youth, families, and peers.
- 2.4. Attending monthly full coalition meetings.
- 2.5. Participating in at least one subcommittee.
- 2.6. Attending coalition sponsored programs, town hall meetings, and community events.
- 2.7. Participating in sustaining the coalition's capacity, involvement, and energy.
- 2.8. Modeling responsible and lawful behavior around drug and alcohol consumption.

3. Please review the following to help us make the most effective use of your unique background, interests and abilities.

3.1 Which of the following best describes your primary place of employment or affiliation: *(Choose only ONE)*

<input type="checkbox"/> Business Community	<input type="checkbox"/> Higher Education	<input type="checkbox"/> Municipality
<input type="checkbox"/> Civic/Volunteer Org.	<input type="checkbox"/> Latino Community	<input type="checkbox"/> Parent
<input type="checkbox"/> Community Task Force	<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Public Health
<input type="checkbox"/> Elders	<input type="checkbox"/> LGBTQ Community	<input type="checkbox"/> Recreation Department
<input type="checkbox"/> Faith/Religious Org.	<input type="checkbox"/> Media	<input type="checkbox"/> Youth (under 21)
<input type="checkbox"/> Health Care Professional	<input type="checkbox"/> Middle/High School Staff	<input type="checkbox"/> Youth Services
<input type="checkbox"/> Other:		

3.2 Indicate resources/services that you or your organization can provide for VARSA: *(Check ALL that apply)*

<input type="checkbox"/> Advertising for VARSA events
<input type="checkbox"/> Design, social media and web services
<input type="checkbox"/> Educational presentations for VARSA and community members
<input type="checkbox"/> Hosting or sponsoring a VARSA meeting or event at your facility
<input type="checkbox"/> Printing or photocopying of VARSA materials
<input type="checkbox"/> Professional training for VARSA and community members
<input type="checkbox"/> Providing volunteers to assist with VARSA events
<input type="checkbox"/> Other:

3.3 Which actions will you take to help reduce underage drug and alcohol use? *(Check ALL that apply)*

<input type="checkbox"/> Distribute informational materials to parents and other adults
<input type="checkbox"/> Assist with data collection: <input type="checkbox"/> youth surveys <input type="checkbox"/> adult/parent surveys <input type="checkbox"/> focus groups,
<input type="checkbox"/> Encourage local grocery stores/restaurants/bars to carefully check I.D.s
<input type="checkbox"/> Encourage schools and police to consistently enforce laws and policies
<input type="checkbox"/> Participate in media campaign planning
<input type="checkbox"/> Participate in strategic planning
<input type="checkbox"/> Peer intervention campaign
<input type="checkbox"/> Serve as an advisor to youth-led projects
<input type="checkbox"/> Work to reduce drug and alcohol advertising
<input type="checkbox"/> Provide volunteer/in-kind support to VARSA (e.g., meeting space, technology expertise, help with newsletter, legislative advocacy, etc.)
<input type="checkbox"/> Work to change policies at the local level by talking to community officials
<input type="checkbox"/> Work to change policies at the state level by talking to legislators
<input type="checkbox"/> Other:

3.4 What would you like to get out of your participation with VARSA? *(Check ALL that apply)*

<input type="checkbox"/> Access to Data	<input type="checkbox"/> Professional networking
<input type="checkbox"/> Resources for expanded services	<input type="checkbox"/> Free exhibit opportunities at VARSA events
<input type="checkbox"/> Positive community presence for my organization	<input type="checkbox"/> Ongoing education
<input type="checkbox"/> Other:	

Signature and Effective Date: I will help VARSA work to reduce and prevent underage drug and alcohol use by engaging, educating and empowering all sectors of our community and increasing collaboration and coordination of community services and resources. Upon signing, this CIA will become effective until either mutual termination or annual review.

I understand that I must submit to a background check, as I may be associated with activities that involve minors.

VARSA Chairperson

Member

Date

Date



Coalition Involvement Agreement Annual Review

<i>Review Date 1:</i>	<i>Review Date 2:</i>
<i>Reviewed by:</i>	<i>Reviewed by:</i>
<i>Extend CIA for another year:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Extend CIA for another year:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Signed by VARSA Representative:</i>	<i>Signed by VARSA Representative:</i>
<i>Member Signature:</i>	<i>Member Signature:</i>
<i>Notes:</i>	<i>Notes:</i>