

Coalition Involvement Agreement

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

and		shall be from: /			
[Membe	r's Name]		[Start	Date]	
□ General Membership:					
[Sec	tor]				
□ Sector Representative:		_ □ Primary □ S	econdary	☐ Interim [☐ Full Term
[Sec	etor]				
First Name:	ι	_ast Name:			
Birth Date:		Sex:			
Highest grade completed:	F	Race:	Ethnic	city:	
Address:	(City:	Zip:		
Email:	F	Phone:			
The best way to reach me is: ☐ E	mail □Voice Mess	age	□Other		
Are you under age 21? ☐ Y	es □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.	2.1. Supporting the coalition's mission and vision.					
2.2.	2.2. Adhering to VARSA By-laws, Code of Conduct, Confidentiality and Ethics, and Policies & Procedures.					
2.3.	2.3. Acting as a positive role model for youth, families, and peers.					
2.4.	2.4. Attending monthly full coalition meetings.					
2.5.	2.5. Participating in at least one subcommittee.					
2.6.	2.6. Attending coalition sponsored programs, town hall meetings, and community events.					
2.7. Participating in sustaining the coalition's capacity, involvement, and energy.						
 Please review the following to help us make the most effective use of your unique background, interests and abilities. Which of the following best describes your primary place of employment or affiliation: (Choose only ONE) 						
☐ Busir	ness Community	☐ Higher Education	☐ Municipality			
□ Civic	/Volunteer Org.	☐ Latino Community	□ Parent			
□ Com	munity Task Force	☐ Law Enforcement	□ Public Health			
□ Elder	rs .	☐ LGBTQ Community	☐ Recreation Department			
☐ Faith	/Religious Org.	☐ Media	☐ Youth (under 21)			
☐ Health Care Professional		☐ Middle/High School Staff	☐ Youth Services			
□ Other:						
3.2 Indicate resources/services that you or your organization can provide for VARSA: (Check ALL that apply)						
□ Advertising for VARSA events						
☐ Design, social media and web services						
☐ Educational presentations for VARSA and community members						
☐ Hosting or sponsoring a VARSA meeting or event at your facility						
□ Printing or photocopying of VARSA materials						
□ Professional training for VARSA and community members						
☐ Providing volunteers to assist with VARSA events						
□ Other:						



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

☐ Distribute informational materials to parents and other	er adults
☐ Assist with data collection: ☐youth surveys ☐ad	ult/parent surveys □focus groups,
☐ Encourage local grocery stores/restaurants/bars to c	arefully check I.D.s
☐ Encourage schools and police to consistently enforce	e laws and policies
☐ Participate in media campaign planning	
☐ Participate in strategic planning	
☐ Peer intervention campaign	
☐ Serve as an advisor to youth-led projects	
☐ Work to reduce drug and alcohol advertising	
☐ Provide volunteer/in-kind support to VARSA	
(e.g., meeting space, technology expertise, help with	
☐ Work to change policies at the local level by talking t	o community officials
☐ Work to change policies at the state level by talking t	o legislators
☐ Other:	
3.4 What would you like to get out of your participation	n with VARSA? (Check ALL that apply)
☐ Access to Data	☐ Professional networking
☐ Resources for expanded services	☐ Free exhibit opportunities at VARSA events
☐ Positive community presence for my organization	☐ Ongoing education
☐ Other:	1
Signature and Effective Date:	
I will help VARSA work to reduce and prevent underag	e drug and alcohol use by engaging, educating and
empowering all sectors of our community and increasing	ng collaboration and coordination of community services
and resources. Upon signing, this CIA will become effe	ective until either mutual termination or annual review.
R Scott Rice, VARSA Chairperson	Member
Date I	Date



Review Date 1:	Review Date 2:
Reviewed by:	Reviewed by:
Extend CIA for another year: □Yes □No	Extend CIA for another year: □Yes □No
Signed by VARSA Representative:	Signed by VARSA Representative:
Sector Rep. Signature:	Sector Rep. Signature:
Notes:	Notes: