

COLLEGE COMMUNITY SERVICES
WELLNESS CENTER CENTRAL
SOCIAL AGREEMENTS

- You have the right to protection from harm.
- You have the right to accept or deny our services.
- You have the right to be treated with dignity and respect.
- You have the right to participate in designing a plan to meet your needs.
- You have the right that your information will be kept confidential.

SOCIAL AGREEMENTS

- While at the Wellness Center, I will participate in a group or activity.
- I will respect the environment by keeping the Wellness Center clean and useable for all by consuming food and/or beverages in designated areas only.
- I understand that person-to-person solicitation for personal financial gain is not allowed at the center unless it's previously approved by MAB and the management at the Wellness Center.
- I will smoke in the designated smoking areas only.
- Drugs, alcohol, and paraphernalia are NOT permitted on the Wellness Center premises.
- I will not be under the influence while on Wellness Center premises.
- I will take full responsibility for me belongings.
 - Personal belongings should be left at home whenever possible. Members may be asked to leave personal belongings in their vehicle.
 - Wallets and/or purses containing personal identification should remain with the member at all times.
- I will be respectful of those who share my community, which includes:
 - Not engaging in verbal aggression, physically aggressive behavior, or property damage.
 - Not bullying members and/or staff verbally, physically, or electronically.
 - Not engaging in any sort of harassment including sexual harassment, inappropriate and/or unsolicited touching, for example: kissing, cuddling, etc.
 - Maintaining healthy boundaries.
- I will be aware of my surroundings when discussing topics associated with my protected health information.
- I will follow Wellness Center's policies and procedures to reduce the spread of illnesses.
 - I will regularly practice handwashing and/or using hand sanitizer.
 - I will stay home if I am not feeling well.
 - I will wear appropriate attire and maintain proper hygiene at all times while at the center.

- While at the Wellness Center I will respect and follow all group rules.
 - I will be respectful of others wanted to use the **Computer Room**. I will not stay on the computer for more than 30 minutes at a time.
 - I will be respectful of others while using games in the **Game Room**.
 - I will respect the condition of the room and its contents.
 - I will communicate with a peer mentor any need or concerns.
 - I will be mindful of others who are want to participate.
 - I will ask a peer mentor to set up all electronic games.
 - I will be respectful of the serenity of others.
 - I will help keep noise and distractions to a minimum while in the **Meditation Room**.

- I will follow all rules while on outings with the Wellness Center.
 - Before being transported in any vehicle, all personal belongings will be placed in the trunk of the vehicle.
 - No distraction of the driver will be permitted while the car is in motion.
 - Smoking is not permitted in any vehicle.
 - Drugs, alcohol, and paraphernalia are not permitted in any part of the vehicle.
 - Weapons of any kind (knives, guns, pepper spray, tasers, etc.) are not permitted in any vehicle.
If the van driver suspects a member has been using alcohol or drugs, he/she reserves the right to refuse transportation.

- In compliance with the Good Neighbor Policy, I will conduct myself in a manner that is not disruptive or be disturbing to the neighborhood.

- Appropriate attire to be worn at all times at the Wellness Center, including community integration activities organized by any of the Wellness Centers.

Member Compliance

By signing this agreement, I agree to abide by the rules of the program as determined by the Member Advisory Board (MAB). I understand that my information may be shared with Wellness Center West and Wellness Center South. If I am suspected of breaking one or more of the Wellness Center rules, the Center will convene a group led by the Program Director and any staff involved in the incident to discuss the incident and determine the appropriate course of action. I am aware that I may be suspended for a length of time as determined by the management team and MAB. The duration of the suspension will depend on the severity of the incident. Please refer to the attached *Guidelines for Exiting Members*.

I understand that when I get exited from one location, I am also being exited from the entire Tustin campus and all three Wellness Center locations. My exit information will be shared with the other sites.

NAME: _____
(Please print clearly)

SIGNATURE: _____ DATE: _____