



SAFEinNM.com

APPLICATION SAFE YOUTH

NAME: _____ SCHOOL: _____

ADDRESS: _____ GRADE: _____

PHONE: _____ E-MAIL: _____

What makes you interested in SAFE Youth? _____

How can you benefit our group? _____

What do you see as some of the specific issues facing teens today related to substance use? _____

Would you be OK with taking random drug tests? YES NO

Have you ever attended a SAFE Youth event (i.e. SAFE After Hours) or supported SAFE Youth (i.e. wearing bracelet)? YES NO

2 School Faculty References (Name and Phone number)

By joining this group I promise to maintain a drug and alcohol free lifestyle.

Signature

Date

Parent Signature

Date

Please return to: SAFE in Northern Michigan
3434 Harbor Petoskey Rd. Ste A
Harbor Springs, MI 49740

SAFE in Northern Michigan exists to prevent youth substance use and increase community awareness of tobacco, alcohol and other substance use in Northern Michigan.