

DATE:

Smyrna Global Outreach

REHAB CONSENT AND INDEMNITY FORM

PERSONAL INFORMATION

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SURNAME:	FIRST NAME:		OTHER NAME/S:	
DATE OF BIRTH:		GENDER:		
RACE:		ID NO:		
COUNTRY OF RESIDENCE:		CITIZENSHIP:		
IF SA PROVIDE PROVINCE OF RESIDENCE:				
PHYSICAL ADDRESS:				
CITY/SUBURB:		POSTAL CODE:		
HOME LANGUAGE:		RELIGION:		
HOME TEL:	EMERGENCY NO:		CELL NO:	
MEDICAL CONDITION:				
MEDICATION ADMINISTERED:				
SPECIAL PROBLEMS REQUIRING COUSELLING:				
INDICATE THE REASON FOR STAY –EXAMPLE: (DRUGS; ALCOHOL; DESTITUTE; OR OTHER):				

BY MY SIGNATURE BELOW, I CERTIFY THE INFORMATION THAT I PROVIDED ON AND IN CONNECTION WITH THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I ALSO UNDERSTAND THAT ANY FALSE STATEMENTS OR DELIBERATE OMISSIONS ON THIS FORM MAY SUBJECT ME TO FACE THE CONSEQUENCES OF BEING REJECTED.

IF THE PERSON IS A MINOR AND BELOW THE AGE OF 18 YEARS, A PARENT OR LEGAL GUARDIAN MAY SIGN ON BEHALF OF HIM/HER. N.B- (COPIES OF I.D's ARE REQUIRED)

X		
SIGNATURE		

RULES AND REGULATIONS

- No person may be in possession of any drugs, alcohol or any other mood altering substance, this is deemed as immediate dismissal.
- No person may be found loitering behind the allocated accommodation building. Such action is ground for instant dismissal.
- No person may consume any drugs, alcohol or any other mood altering substance. Such actions are grounds for instant dismissal.
- Any criminal behavior of any kind by a person is prohibited.
- No prescribed medication or vitamins or medication of any kind may be allowed (All medical issues are to be referred to the resident Pastor)
- It is the responsibility of the person/s to present themselves at the given times to receive their medication
- The Mission Pastor reserves the right to recommend that a person consults with a Psychiatrist, GP or any other professional. The expenses for these consultations fall outside the mission rehabilitation fees.
- No sexual activity and / or exclusive relationships may be conducted during the stay.
- Abusive behavior of any kind is prohibited- example: (threatening, verbal or physical abuse) is not allowed.
- All acts of violence are prohibited, including self- mutilation and any other form of violence towards oneself and others.
- All duties assigned to person/s are required to be completed and tools MUST BE put away after you have completed said duty.
- Vandalism of the property is prohibited.
- No males are permitted in the female rooms and no females are permitted in the male rooms. No visitors are allowed into rooms.
- The Mission Pastor reserves the right to inspect rooms at any time and may also require the person/s to show contents of personal belongings.
- The attendance of all group and individual sessions held on the mission grounds are mandatory. If a person has a valid reason for missing a group or session he/she will be required to request permission from the resident Pastor before the morning Devotion.
- Person/s is expected to attend all meal times unless permission is obtained and reason is acceptable.
- Person/s may not lend, borrow or exchange money amongst them.
- Person/s may not have any contact with any other person/s apart from those residing on the Mission premises for the initial 30 days.

• The Mission Pastor reserves the right to change these rules with immediate effect at his sole discretion.

GENERAL RULES WHEN SHARING A ROOM

- Respect your room mates.
- Ensure that your bed is made up prior to leaving your room in the morning.
- Ensure that all windows are closed and doors locked before going to bed.
- A room leader will be appointed and those sharing the room are to co-operate with the room leader.
- Acceptable behavior and hygiene is to be adhered to at all times.
- It is necessary that your room is neat and tidy.
- Any contravention of these rules will result in specific consequences- which may further result in verbal warnings leading to expulsion.
- The Mission staff assumes no responsibility for the safety of the person & personal property or possessions.
- The Mission staff does not accept any liability or loss incurred by a person during their stay.

SOCIAL ETHICS

- HONESTY- Do not purposefully mislead or take advantage of the trust of others.
- RESPECT Respect yourself and others.
- COURTESY- Show support and be courteous towards others.
- RESPONSIBILITY- Actively participating by sharing and confronting issues that arise with yourself and others.
- CONFIDENTIALITY / ANONYMITY- Any matter discussed in a group are not to be discussed outside the group. Matters arising in and around the Mission are not to be discussed with anyone who is not a resident of the Mission.

FEES AND COSTING

*	On admission the person will be requested to provide a deposit ofwhich will cover any damage or theft on property which will be non-refundable if the person leaves on own accord or runs away.
*	If the person responsible for him/her is satisfied with the results and wants them to leave and as long as there is no damages or theft to property, the deposit will be refunded, but ONLY to the person responsible.
*	A sum of R3 500 will be payable on the first day of admission. And thereafter every month on the same date until the person has recovered or has left. This amount assists in the nutritional, basic needs and general wellbeing of the person.
*	This cost includes the transportation to the nearby clinic if person has any appointments or needs chronic medication.
*	If the person is on Sugars and detoxification is required, an additional fee of R500 is required for the Methadone. NB- This will be required only if the person responsible is unable to purchase it.
*	Pensioners and the homeless will receive preferential treatment and a concession may be considered, only upon proper investigation.

I AGREE TO THE ABOVE REQUIREMENTS



AGREEMENT

I, the undersigned, hereby accept and agree to the following terms in order to ensure my stay at Smyrna Global Outreach is comfortable for everyone:

- Sharing of any personal belongings is a personal decision between individuals and any disagreements with regards to shared items should not be brought up as a complaint.
- I will be liable to pay a fine to compensate for any damage brought to the Mission Property in any way, shape or form during my stay. I agree and accept that the amount of the fine payable will be determined by the Mission Board after the damage has been assessed.
- I am aware of my responsibility to maintain the cleanliness and hygiene of my living space and that my accommodation will be subject to random inspections.

FULL NAME	I.D. NO
SIGNED	DATE
WITNESS FILL NAME	NATINECC CICNATURE

LIST OF ITEMS BROUGHT WITH (UPON ARRIVAL)	<u>LIST OF ITEMS TAKEN WITH</u> (UPON DEPARTURE)