

HPA Ohana Hanai Family Program Parent Pledge

I support our HPA ohana's efforts to provide a safe, drug-free environment for our children/adolescents. I pledge that:

1. I will be present or provide responsible adult supervision for HPA students who are my guests.
2. I will not serve alcoholic beverages to guests under twenty-one years of age, or allow guests under the age of twenty-one to consume alcoholic beverages in my home or on my property, in compliance with Hawaii State law.
3. I will not allow the use or presence of any illegal drugs in my home or on my property.
4. I will take all necessary precautions to ensure that the children in my care are safe from physical, emotional, mental, sexual, and spiritual abuse.
5. I welcome calls from other parents whose children/adolescents have been invited to my home.

Print name(s) _____

Home Address _____

Home Phone _____ Other # _____

Email: _____@_____. _____

Children in the Hanai Host Home

Child/Adolescent's Name _____ Grade _____ School _____

Child/Adolescent's Name _____ Grade _____ School _____

Child/Adolescent's Name _____ Grade _____ School _____

Child/Adolescent's Name _____ Grade _____ School _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____