Sobriety Hub
Automate your sober living

7. Contract Against Suicide, Self-Harm & Harm to Others

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First Name *

Last Name *

I agree to the following:

I understand that staff have a legal, ethical, and professional obligation to take all practicable and reasonable measures she/he considers necessary to ensure my safety from suicide and/or self-harm. I agree that this is in my best interests and that I will cooperate with my therapist by providing honest information about any thoughts, desires, or impulses I have to hurt or kill myself, including self-mutilation. *

Initials

I agree not to act on any thoughts, desires, or impulses I may have to hurt or kill myself, including self-mutilation, between now and completion of The Damascus Road Foundation house program

Initials

If, at any time, I feel unable to resist any thoughts, desires, or impulses I may have to hurt or kill myself, including self-mutilation, I agree that rather than act to hurt or kill myself I will do the following: *

Select an option

I agree that I will either keep this contract with me or where I can quickly get to it at all times while it is in force, or that I will copy down these telephone numbers and keep them with me while this contract is in force. *

Initials

If, after talking with my therapist and/or a Suicide/Crisis Hotline worker I still feel unable to resist any thoughts, desires, or impulses I may have to hurt or kill myself, including self-mutilation, I agree that rather than act to hurt or kill myself I will call 911 and tell the 911 operator that I am thinking or hurting or killing myself, or I will physically go to the Emergency Room at the nearest hospital and tell the staff there that I am thinking or hurting or killing myself. *

Initials

Other needs or strategies I agree to are as follows: _

Please explain...

Date

Month * Day * Year *

Month Day

Signature *

Clear

Sign above

Previous Submit