

This Membership is entered into this _____ day of _____, by and between Gateway Recovery House, Inc. (hereinafter "Gateway") and _____ (hereinafter "Resident"), and shall govern Resident's living and participation in the sober living house known as Gateway Recovery House, Inc. at 30 George Street Torrington, Connecticut.

1. ZERO TOLERANCE POLICY

We strongly enforce a Zero Tolerance Policy Concerning Use of Drugs and Alcohol – While living at Gateway, Resident is to remain clean and sober at all times, and shall refrain from the use of alcohol, illegal drugs, or prescription drugs for which he does not have a valid prescription. Drug Paraphernalia and off label use, dosing or administration of prescribed drugs constitutes a violation of this rule. Any violation of this rule will result in **immediate** termination of the Resident's tenancy. All medications to be taken by the Resident must be pre-approved by Gateway. Gateway Recovery House, Inc. is enrolled in a "med lock up" program. Each Resident will have 1 week to fill out paperwork from their provider to enroll in the med-lock up program. Details of the program can be discussed with the House Manager. Any violation of these rules will result in immediate termination of the Resident's tenancy.

2. DRUG TESTING

Resident agrees that, at request of the house manager at Gateway and/or Management of Gateway, he shall be subject to a drug test, Breathalyzer test and room search upon move-in and randomly thereafter.

Any violation of this rule will result in immediate termination of the Resident's tenancy. There is a 1-hour time limit to produce a urine sample. Failure to produce the urine sample in the 1-hour time limit will be treated as a positive test and will result in immediate termination of the Resident's tenancy.

3. PROBATIONARY PERIOD

The first thirty (30) days of residency at Gateway is a probationary and orientation period. During that initial 30-day period, Resident shall be required to:

- Join a Home Group and be active in that Home Group.
- Attend a minimum of four (4) 12-step recovery meetings per week.
- Obtain a qualified sponsor and be actively working the 12-steps with that Qualified Sponsor.
- Secure employment of at least 30 hours (maximum of 50 hours), be a full time student, or be active in at least 20 hours of ongoing volunteer work.

- Abide by a 10 p.m. curfew each night (The curfew may be extended to 1:00 am once Resident has fulfilled all of these requirements, and successfully completed their 30 day probationary period).

4. IN-HOUSE MEETINGS

Each Resident, unless scheduled to work at the time, is required to attend the weekly in-house meeting at 8pm on Mondays. No guests are allowed at the in-house meetings.

5. MEETINGS

The Resident is required to attend a minimum of four 12-step Recovery Meetings per week (AA/NA) for the first 30 days of tenancy, and a minimum of three 12-step Recovery Meetings per week (AA/NA) for the period thereafter. One of these meetings will be his Home Group. Two meetings attended on the same day count as one meeting, in order to avoid resident not planning ahead and overloading meetings at weeks end.

6. CHORES - CLEANLINESS

Each Resident is required to do a scheduled chore shift each week as assigned on the posted chore schedule. Chore assignments will be assigned weekly during the house meetings. It is your responsibility to maintain your listed area for the entire week without exception. Spot checks will be made periodically by Management and will result in consequences if not maintained. All commons areas are to be free of unnecessary personal items at all times. It is the responsibility of all residents to maintain a clean and livable environment. If your living space is not kept clean and personal hygiene becomes a health and/or concern, Management reserves the right to take any necessary action, which could also include eviction. The Resident is required to be up and have his bed made by 9 am and maintain a reasonable level of cleanliness around the house as required by the managers.

7. PETS

No pets of any kind are allowed. If a pet is brought in and cared for in any way, this is grounds for eviction.

8. CONFIDENTIALITY

Residents are expected to abide by confidentiality and anonymity of all residents in the house. What happens at Gateway, stays at Gateway.

9. RELATIONSHIPS

Unless married, resident must agree not to have any one-on-one contact with existing partners (group settings are okay) for the first 30 days of tenancy. No new romantic relationships are to be established until management deems it appropriate based on resident's progress. This is done as part of an effort to focus on recovery.

10. VISITORS

All visitors must be approved by the house manager and are restricted to the first floor of either house. Visitors are allowed to visit in the common areas (i.e. living room, kitchen and backyard only). There will be no visitors after 11:30PM Monday through Thursday and 1:00AM Friday through Sundays. There should be no visitors during the scheduled house meetings. Management reserves the right to disallow any visitor for any reason at any time. There are to be no visitors of ANY kind in any of the bedrooms at ANY time. Failure to meet this requirement will result in immediate eviction. Any visitor not complying with house rules or not conducting themselves in a respectful manner, will be potentially asked to leave and will no longer be welcome to visit at the house.

11. SMOKING

There will be no smoking in any area of the house. Smokeless tobacco and vaporizers are allowed inside as long as courteous habits are followed. All cigarette butts should be disposed of properly.

12. PROPERTY

Be respectful of the house and furnishings. No hanging pictures on the walls, etc.. Please treat all property with respect. You will be held financially responsible for any damage to the property or grounds that occur as a result of your negligence or inappropriate behavior. Intentional destruction of property is grounds for immediate termination and police will be contacted if appropriate. Any theft will result in immediate eviction as well.

13. GRIEVANCES

Resident input is highly encouraged and is necessary for a healthy living environment. We always encourage residents to bring to the attention of the house manager any immediate concerns. Concerns and/or complaints can be discussed in the weekly house meeting as well. **If at any time, you feel your concerns are not being address by the house manager, or you feel there is a situation that should be taken up with someone other than the house manager, you are encouraged to contact the house owner, Jamie Rogers, immediately at (203) 510-1762.**

14. OVERNIGHTS

Resident shall be eligible for an outside overnight after 30 days. All requirements must be fulfilled in provision #3. You may leave overnight for up to (1) two nights per week. You are responsible for getting another resident to cover any household responsibilities you may have during your overnight(s) out.

15. DISRUPTIVE BEHAVIOR

Disruptive Behavior by the Resident will not be tolerated and will result in immediate termination of the Resident's tenancy. Disruptive behavior includes, and is not limited to, the following:

- Physical or verbal abuse/violence.
- Destruction of property
- Disrespect to other house members
- Lying, dishonesty or theft Resident will be held legally and financially responsible for damage to persons and property.

16. WARNINGS-VIOLATIONS-EVICTIONS

Resident is not to accrue more than 2 written warning during his stay. Please be aware of the violations outlined in the Membership Agreement that cause immediate eviction. If management, at any time, believes you are not compliant with any of the rules outlined in this agreement, or believes that you are not engaged in a responsible recovery program, you may be directed to leave immediately or receive a warning. Decisions are made on an individual basis with consideration for the safety of the entire house, as well as the needs of each individual. Anyone being asked to leave will forfeit their deposit. Anyone asked to leave will be considered trespassing anytime they are on the property without management present.

17. PAYMENTS

Weekly payments are due in advance by 6:00 PM Friday for the following Saturday through Friday week (rent is paid in advance weekly). Any late payments will be charged an additional \$25.00.

Current Fees:

Single Bedroom: \$150.00/week

**Security of \$150.00/per week be required prior to move in. This security will be refunded to the resident upon move out as per the Membership Agreement.

The first weeks rent will include an additional \$100.00 fee. This fee is **non-refundable and applies towards the general use of provided toiletries, linens, laundry services and other essentials that are provided by the house.

Residents are encouraged to pay online via our website at www.gatewayrecoveryhouse.com. We also accept cash, cashier's checks or money orders (made out Gateway Recovery House, Inc.). Security deposit will be returned only if a two (2) week notice is given and room is cleaned. The amount of Resident's rental obligation may be increased or decreased by Gateway upon (30) days advance notice. Resident's failure to pay said rental obligation within a reasonable period of 5 days, may result in immediate termination of Resident's tenancy. For any questions regarding using the online payment system, please contact Jamie Rogers @ (203) 510-1762.

18. PROVISIONS

Each resident will be provided a set of new linens (sheets, pillow and pillow case). Gateway also supplies common use items such as cookware, dining ware, coffee and filter, cleaning products, toilet paper, trash bags, paper towels, hand soap, shampoo, and body wash.

19. MOVING OUT

Gateway Recovery House is meant to be a reintegration and transition for you between treatment and independent living. To receive your security deposit back, you must give us a minimum two (2) week written notice before you move so that you may have time to complete any unfinished business and to encourage responsibility and planning in your recovery. Your room must also be clean and vacuumed. Anyone not giving a minimum two (2) week notice or failing to clean up will forfeit their deposit.

20. IOP/OUT-PATIENT TREATMENT

Every resident participating in a treatment center IOP (Intense Out-Patient Treatment), OP (Out Patient Treatment) or CC (Continuing Care Program) will provide a release to said treatment facility for Gateway Recovery House, Inc. prior to move in. Gateway will regularly communicate with said treatment facility to insure participation is being met with no late arrivals. It is understood that expulsion from any IOP/OP/CC program is grounds for immediate eviction. House Manager and Staff will communicate information as to your attendance and participation in said programs.

21. INDEMNIFICATION

Assumption of Risk, Release & Indemnification. Resident agrees to assume and accept all risks arising out of, associated with or related to Resident's participation in Gateway Recovery House and residence at 30 George Street Torrington, CT (the "premises") including but not limited to those risks which may have been caused in whole or part by the negligent actions or omissions of Gateway Recovery House, Inc. or its agents. Gateway Recovery House and its agents shall NOT be liable for any damages or injury of or to the person or property of the Resident, Resident's family, guests, invitees or agents entering the premises at 30 George Street Torrington, CT (the "Premises")

– including but not limited to damage or injury (to person or property) caused in whole or in part by the negligent actions or omissions of Gateway Recovery House or its agents – unless such damage or injury is proximately caused by the reckless or intentional misconduct of Gateway Recovery House or its agents. Resident hereby releases Gateway Recovery House and its agents from all such liability, and further agrees to indemnify, defend and hold Gateway Recovery House and its agents harmless from any and all claim or assertions of damage or injury to the person or property of Resident occurring on or about the Premises, with the sole exception of claims for damage or injury proximately caused by reckless or intentional misconduct of Gateway Recovery House or its agents.

I have read and fully understand all the rules outlined in this agreement. I understand that the rules are strictly enforced, and any violation(s) may result in immediate eviction.

Printed Name: _____

Signature: _____

Date: _____

Residents move-in date shall be: _____

Sober, Safe and Respectful Environment Agreement

I, _____, am fully aware that I am entering into an agreement to live in an alcohol and drug free residence at Gateway Recovery House, Inc. I am choosing to live here in order to increase my chances of maintaining a sober and productive life. In order to maintain this environment for myself and other residents I agree to vacate the premises immediately (within 15 minutes) without argument or retaliation if I am found to be under the influence of any mind altering substances not prescribed by a licensed physician.

I realize, that should the police department be summoned, that Gateway Recovery House, Inc. will press any appropriate charges, thus not enabling me to act out in my addiction. Any acts of intimidation, violence or theft will also result in immediate expulsion. I understand that should I be discharged for any of the above violations any fees paid including my security deposit will be forfeited. I further understand that if asked to leave, for any reason, I must take my possessions with me or make an appointment with Gateway Recovery House, Inc. management within 72 hours of leaving to return to claim my possessions. Gateway will not store or be responsible for possessions. I understand that if all items are not retrieved within stated time frame, they will be immediately donated.

I understand that I am not a tenant and this is not my house, but rather that I am a resident of the Gateway Recovery House program, and membership in the program is based upon sobriety and working a program of recovery. By signing below, I attest that I will adhere to Sober, Safe and Respectful Environment Agreement:

Printed Name: _____

Signature: _____

Date: _____

Good Neighbor Policy & Agreement

I, _____, understand that to exemplify the “Good Neighbor Policy” I will always be mindful to: Follow stop signs, follow speed limits, watch for pedestrians and neighborhood children, park only in the driveway, be courteous with my language at all times, never play loud music or have conversation in front of the house after 10PM and live in the house in any other manner, not expressly stated in this policy but is hereby understood to be respectful towards neighbors and does not disturb their peace. To the best of my ability, I will conduct myself, always, as a “Good Neighbor”.

Waiver of Liability

I, _____, hereby understand and acknowledge that the programs, outings and events held by the Gateway Recovery House, Inc. and any/all of its affiliates may expose me to many inherent risks, including accidents, injury, illness, or even death. I assume all risk of injuries associated with participation including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, and all other such risks being known and appreciated by me. I hereby acknowledge my responsibility in communicating any physical and psychological concerns that might conflict with participation in any activity. I acknowledge that I am physically fit and mentally capable of performing the physical activity I choose to participate in. I understand even if I am required to attend an event, it is my decision to “opt out” of participating in the event. After having read this waiver and knowing these facts, and in consideration of acceptance of my participation in the Gateway Recovery House, Inc. events & activities, I agree, for myself and anyone entitled to act on my behalf, to HOLD HARMLESS, WAIVE AND RELEASE the Gateway Recovery House, Inc., its officers, agents, employees, organizers, representatives, and successors from any responsibility, liabilities, demands, or claims of any kind arising out of my participation in the Gateway Recovery House, Inc. programs and/or events. By my signature I indicate that I have read and understand this Waiver of Liability. I am aware that this is a waiver and a release of liability and I voluntarily agree to its terms.

Printed Name: _____

Signature: _____

Date: _____