

WEEKLY RULES

1. MORNING MEDITATION IS MANDATORY AS A GROUP EVERY MORNING.
2. EACH PERSON WILL BE REQUIRED TO COMPLETE THE GROWTH TRACK AT REACH KC.
3. EACH PERSON WILL SERVE WEEKLY ON A SERVE TEAM AT REACH KC.
4. ATTENDANCE AT REACH KC SUNDAY SERVICE IS MANDATORY WEEKLY.
5. MANDATORY MEETING WILL BE EVERY SUNDAY AT 6:30PM.
6. RENT WILL BE PAID WEEKLY AT THE MANDATORY MEETING IN THE AMOUNT OF \$130.
7. IT IS MANDATORY TO ATTEND AT LEAST ONE REACH GROUP WEEKLY FOR EACH PERSON.
8. CHORES WILL BE COMPLETED!

HOUSE RULES

#1. **WE HAVE A ZERO TOLERANCE POLICY ON THE USE OR POSSESSION OF ANY TYPE OF MOOD ALTERING SUBSTANCES.** THIS INCLUDES ANY PRESCRIPTION NARCOTICS, DRUGS, OR ALCOHOL. THIS ALSO INCLUDES THE ABUSE OF ANY ANTIPSYCHOTICS, SLEEP AIDS, OPIOD ANTAGONISTS, OR ANTIDEPRESSANTS THAT YOU MAY BE PRESCRIBED. **FAILURE TO ABIDE BY THIS RULE WILL RESULT IN IMMEDIATE DISMISSAL FROM THE PROGRAM.**

#2. **NO FIGHTING.** **ACTS OF VIOLENCE, THREATS OF VIOLENCE, OR ANY OTHER INTIMIDATION TACTICS TOWARDS STAFF OR RESIDENTS WILL NOT BE TOLERATED** AND WILL RESULT IN **IMMEDIATE DISMISSAL** FROM THE PROGRAM, THE INABILITY TO RETURN TO THE PROGRAM, AND POSSIBLE PROSECUTION.

#3. **NO STEALING.** THEFT WILL NOT BE TOLERATED WHATSOEVER AND **WILL RESULT IN IMMEDIATE DISMISSAL FROM THE PROGRAM.** FAILURE TO ABIDE BY THIS RULE MAY ALSO RESULT IN POSSIBLE PROSECUTION.

#4. **CURFEW IS FROM 10 PM TO 6 AM SEVEN DAYS A WEEK.** IF YOU HAVE A JOB OR ANY OTHER ACTIVITIES SCHEDULED OUTSIDE OF THESE HOURS, **YOU MUST HAVE PERMISSION FROM THE PROGRAM DIRECTOR.** YOU MUST ALSO PROVIDE VERIFICATION OF YOUR WORK SCHEDULE. **IF YOU BREAK CURFEW, YOU WILL BE WRITTEN UP AND SUBJECT TO DRUG AND/OR ALCOHOL TESTING.**

#5. **EMPLOYMENT IS MANDATORY.**

IF YOU ARE UNEMPLOYED YOU WILL BE REQUIRED TO LEAVE THE FACILITY BETWEEN THE HOURS OF 8 AM TO 2 PM MONDAY THROUGH FRIDAY TO SEEK EMPLOYMENT. THIS IS NON-NEGOTIABLE. REFUSAL TO SEARCH FOR A JOB WILL RESULT IN A WRITE UP AND POSSIBLE DISMISSAL FROM THE PROGRAM. IF YOU ARE ON DISABILITY, SOCIAL SECURITY, OR ANY OTHER FORM OF BENEFITS, **YOU WILL BE REQUIRED TO DO VOLUNTEER WORK** AS DIRECTED BY THE PROGRAM DIRECTOR.

#6. **OVERNIGHTS ARE NOT AN OPTION UNLESS OTHERWISE APPROVED.** NO EXCEPTIONS.

IF YOU WISH TO GO ON AN OVERNIGHT PASS YOU MUST SUBMIT A WRITTEN REQUEST A WEEK IN ADVANCE, BE APPROVED BY THE ADMINISTRATION, AND MEET THE REQUIRED CRITERIA. **IF YOU TAKE AN OVERNIGHT PASS WITHOUT PERMISSION IT WILL BE ASSUMED THAT YOU HAVE GONE AWOL AND YOU WILL BE WRITTEN UP.**

#7. **MANDATORY MEETINGS.**

RESIDENTS MUST ATTEND ALL OF THE REQUIRED WEEKLY MEETINGS, MORNING MEDITATIONS, HOUSE MEETINGS, AND SUNDAY SERVICES. **MISSING ANY OF THESE MEETINGS WITHOUT SPEAKING TO THE ADMINISTRATION PRIOR TO YOUR ABSENCE WILL RESULT IN A WRITE UP.**

#8. **RENT IS DUE EVERY SUNDAY AT THE MANDATORY HOUSE MEETING AT 6:30PM.** RENT IS \$130.00 A WEEK. **FAILURE TO REMAIN CAUGHT UP ON RENT CAN RESULT IN DISMISSAL FROM THE PROGRAM.**

#9. **PERSONAL HYGIENE AND SELF CARE.**

RESIDENTS ARE EXPECTED TO SHOWER AND DO LAUNDRY ON A REGULAR BASIS. **THIS INCLUDES WASHING YOUR BED**

LINENS. FAILURE TO MAINTAIN PROPER SELF CARE AND GOOD HYGIENE PRACTICES WILL RESULT IN A WRITE UP.

#10. **CLEANLINESS AND ROOM EXPECTATIONS.**

UPON ENTERING THE PROGRAM RESIDENTS WILL BE ADDED TO A CHORE ASSIGNMENT BOARD AND WILL BE EXPECTED TO COMPLETE THE CHORES ASSIGNED TO THEM DAILY. GOD IS A GOD OF ORDER... LET YOUR AREA REFLECT THAT! RESIDENTS ARE EXPECTED TO **PROPERLY MAKE THEIR BEDS, STORE ITEMS IN DESIGNATED AREAS, AND TO KEEP THEIR AREA CLEAN AND FREE OF TRASH AND CLUTTER.** THIS INCLUDES BUT IS NOT LIMITED TO, **VACUUMING, SWEEPING AND MOPPING, WIPING DOWN SURFACES, PLACING TRASH IN PROPER CONTAINERS, EMPTYING TRASH AS NEEDED, WASHING DIRTY DISHES, AND MAINTAINING BATHROOMS AND SHOWERS.** THESE BASIC THINGS SHOULD BE DONE BEFORE RESIDENTS GO TO WORK, MEETINGS, OR ANY OTHER ACTIVITIES. PERSONAL DECORATIONS WILL ONLY BE HUNG IN BEDROOMS WITH COMMAND STRIPS ONLY! FAILURE TO COMPLY WITH THIS RULE WILL RESULT IN A WRITE UP.

#11. **COMMUNITY SERVICE REQUIREMENTS.**

ALL RESIDENTS ARE REQUIRED TO COMPLETE A MINIMUM OF 2 HOURS OF COMMUNITY SERVICE ON A WEEKLY BASIS. ALL RESIDENTS WILL BE GIVEN A COMMUNITY SERVICE TRACKING LOG UPON ENTRY INTO THE PROGRAM AND WILL BE RESPONSIBLE FOR FILLING OUT THEIR SHEET UPON COMPLETION OF ACTS OF COMMUNITY SERVICE. **THESE SERVICE HOURS ARE TO BE COMPLETED AT REACH KC AND IN A MANNER DESIGNATED AND APPROVED BY THE ADMINISTRATION.** RESIDENTS ARE RESPONSIBLE FOR INSURING THAT THIS REQUIREMENT ARE MET.

#12. **ALL RESIDENTS ARE SUBJECT TO RANDOM DRUG AND ALCOHOL SCREENING.** RANDOM UA'S, BREATHALYZERS,

AND OTHER FORMS OF SUBSTANCE DETECTION WILL BE ADMINISTERED RANDOMLY AT ANY GIVEN TIME. TEST WILL BE PERFORMED WITH STAFF PRESENT. **FAILURE TO SUBMIT TO, OR REFUSAL OF ANY OF THESE DETECTION METHODS WILL RESULT IN AN AUTOMATIC DIRTY AND IMMEDIATE DISMISSAL FROM THE PROGRAM.**

#13. **PRESCRIPTION MEDICATIONS.** **THERE WILL BE NO PSYCH MEDS OR NARCOTIC MEDS AT ANYTIME FOR ANY REASON! NOR WILL WE ACCEPT ANYONE ON SUBSTITUTION MEDS (MEDS THAT HELP WITH WITHDRAWS).**

#14. **VANDALISM OR INTENTIONAL PROPERTY DAMAGE** TO EITHER THE FACILITY'S PROPERTY OR RESIDENT'S PERSONAL PROPERTY **WILL RESULT IN IMMEDIATE DISMISSAL FROM THE PROGRAM AND POSSIBLE PROSECUTION.**

#15. **CODE OF CONDUCT.** WHEN IN PUBLIC RESIDENTS ARE REPRESENTATIVES OF THIS PROGRAM AND AS SUCH WILL BE HELD TO A HIGHER STANDARD. RESIDENTS ARE EXPECTED **TO TREAT WOMEN IN AN HONORABLE MANNER AND TO WATCH THEIR LANGUAGE** WHEN ENGAGING IN ACTIVITIES IN THE COMMUNITY. IF YOU CONDUCT YOURSELF POORLY YOU WILL BE WRITTEN UP. **SEXUAL MISCONDUCT OF ANY NATURE WILL RESULT IN IMMEDIATE DISMISSAL.**

#16. **RESIDENTS WILL UNDER NO CIRCUMSTANCE POSSESS FIREARMS** ON THEIR PERSON, IN THEIR LIVING AREAS, IN THEIR VEHICLES, OR ON THE PREMISIS. **THIS WILL RESULT IN IMMEDIATE DISMISSAL FROM THE PROGRAM.**

#17. **DISRESPECT WILL NOT BE TOLERATED.** SHOW RESPECT TO THE STAFF AND OTHER RESIDENTS IN THE PROGRAM. **TREAT OTHER PEOPLE AS YOU WOULD LIKE TO BE TREATED** OR YOU WILL BE WRITTEN UP. THIS

INCLUDES RESPECTING THE WORK HOURS OF OTHER RESIDENTS.

#18. **FAILURE TO PROGRESS OR PARTICIPATE** IN PROGRAM ACTIVITIES, COMMUNITY OUTREACHES, OR PROGRAM REQUIREMENTS WILL BE CONSIDERED **FAILURE TO THRIVE AND CAN RESULT IN DISMISSAL FROM THE PROGRAM.**

#19. **WOMEN ARE NOT ALLOWED IN THE HOUSE.** NO EXCEPTIONS. **IF YOU BRING A WOMAN INTO YOUR UNIT YOU WILL BE DISMISSED FROM THE PROGRAM.** IF YOU WISH TO VISIT WITH SOMEONE YOU MAY DO SO IN THE PARKING LOT FOR A SHORT PERIOD OF TIME OR GO VISIT WITH THEM ELSEWHERE. YOU WILL NOT SPEND HOURS VISITING A WOMAN IN THE FACILITIES PARKING LOT. THIS IS NON-NEGOTIABLE. **IF YOU ARE FOUND TO BE IN VIOLATION OF OUR SEXUAL MISCONDUCT GUIDELINES WHILE ON THE PREMISIS VISITING WITH A FEMALE OR SIGNIFICANT OTHER YOU WILL BE DISMISSED FROM THE PROGRAM IMMEDIATELY.**

#20. **SIGN IN/ SIGN OUT.** EACH UNIT WILL HAVE A SIGN IN/ SIGN OUT SHEET. RESIDENTS ARE EXPECTED TO SIGN OUT WHENEVER LEAVING THE PROPERTY AND SIGN IN UPON RETURN. **FAILURE TO DISCLOSE WHERE YOU ARE GOING AND WHEN YOU LEAVE WILL RESULT IN A WRITE UP AND POSSIBLE DISCIPLINARY ACTION.**

CHORE EXPECTATIONS

KITCHEN AREAS

DISHES DONE, COUNTERTOPS CLEANED AND FREE OF CLUTTER, POTS, PANS AND DISHES PUT AWAY IN PROPER STORAGE AREAS, STOVE TOP AND OVEN CLEANED, REFRIGERATOR, COFFEE POT, MICROWAVE, AND ANY OTHER APPLIANCES CLEANED, PANTRY/CABINETS ORGANIZED, SWEEP AND MOP, SINKS CLEANED, TRASH EMPTIED AND BAG REPLACED, SHAKE OUT ANY FLOOR RUGS

BATHROOMS

SHOWERS CLEANED, SHOWER CURTAINS WASHED IF NEEDED, TOILETS SCRUBBED AND CLEANED, TOILET PAPER REPLACED ON HOLDER, SWEEP AND MOP, SINKS CLEANED, COUNTERTOPS CLEANED AND CLEARED OF HYGIENE PRODUCTS, TRASH EMPTIED AND BAG REPLACED, MIRRORS CLEANED

LIVING ROOM AREAS

SWEEP AND MOP/VACUUM, COUCHES MADE PRESENTABLE, TRASH PICKED UP AND CLUTTER CLEARED, DUST END TABLES AND OTHER FURNITURE, CLEAN WINDOWS, DUST CEILING FANS AND LIGHT FIXTURES

BEDROOM AREAS

BEDS MADE, DRESSERS ORGANIZED AND DUSTED, END TABLES DUSTED AND ORGANIZED, DIRTY CLOTHES PUT AWAY IN PROPER AREAS, DRAWERS PUSHED IN, CEILING FANS AND LIGHT FIXTURES DUSTED, CLOSETS CLEANED AND ORGANIZED, SWEEP AND MOP/VACUUM, CLEAR CLUTTER, THROW AWAY TRASH, THROW AWAY BOXES, PUT STUFF AWAY IN PROPER STORAGE CONTAINERS, ROOM NEAT

AND ORGANIZED, WINDOWS CLEANED AND WINDOW SILLS DUSTED, ETC

GROUNDS

PORCHES CLEANED, SWEPT, AND FREE OF CLUTTER, STAIRS SWEPT, TRASH CANS EMPTIED, DUMPSTER AREA CLEANED, CIGARETTES AND TRASH PICKED UP, MOW AND WEED EAT, TABLES CLEANED OFF, OUTSIDE WINDOWS CLEANED, GRASS MOWED, SIDEWALKS SHOVELED, ETC

WRITE UP POLICY

IF ANY PERSON RECEIVES A WRITE UP SANCTIONS WILL BE MANDATORY.

SANCTIONS:

1. WRITE ESSAY ABOUT WHAT THEY DID AND WHY IT IS UNACCEPTABLE BEHAVIOR.
2. FIND AND WRITE SCRIPTURES PERTAINING TO MISCONDUCT.
3. RESTRICTION FROM EXTRACURRICULAR ACTIVITES.
4. A FINE MAY BE ASSESSED IF ANY OTHER SANCTIONS HAVE BEEN EXHAUSTED.
5. TOO MANY WRITE UPS WILL RESULT IN DISMISSAL OF THE PROGRAM.

REACH HOMES
PROGRAM AGREEMENT CONTRACT

I _____, agree to follow all rules, regulations, guidelines, protocols, and procedures outlined in the following agreement. I fully understand that failure to observe any of the following may result in my immediate dismissal from the program and removal from the facility and its respective boundaries. I also understand that the Reach Homes and its affiliates reserve the right to remove any resident from the program or the facility at any given time for any reason without being given notification prior to removal from said program or facility.

By initialing each of the following stipulations and signing this document, I acknowledge that I understand and agree to each stipulation:,

_____ Substance Abuse. I understand that there is a ZERO TOLERANCE policy on the use or possession of drugs and alcohol while participating in this program. This includes medical marijuana. This also includes the abuse of any medications that may be prescribed to you.

_____ Random Urinalysis and BAC tests. I understand that I am subject to random drug testing at any given time. Failure to submit to a drug or alcohol test or attempts to dilute or pass a drug test using dishonest methods will result in immediate dismissal and removal from the program.

_____ Program Participation Fees are \$130.00 per week and due on every Sunday. Failure to pay these fees on the specified date or falling behind on these fees may result in immediate dismissal from the program and the facility or restriction. I also understand that if I owe

fees when leaving this program I will be expected to pay them in full before I am eligible for return to said program.

_____ House Rules. I understand that failure to follow the programs rules and expectations may result in immediate dismissal from the program and the facility.

_____ Chores. I understand that I will be assigned chores by my Unit Coordinator and will be expected to complete these assignments on a daily basis. Even if you are considered disabled you will be required to complete your chore assignments. I also understand that I am expected to keep my living area and myself clean according to program standards. This includes but is not limited to; proper hygiene, making my bed, and keeping my unit and living area clean and organized.

_____ Meeting requirements. I agree to attend all Mandatory Meetings, house meetings, church services, discipleship courses, and any outside meetings or functions that may be required of me by the program and its respective administration.

_____ Community Service Requirements. I understand that I am required to complete a total of 8 hours of community service every month at a place and in a manner approved by the administration. I also understand that failure to do so may result in my dismissal from the program.

_____ Sanctions. I understand that failure to abide by the programs rules, policies, and procedures may result in a write up and corrective action including but not limited to; restriction, loss of phase, loss of overnight privileges, added community service hours, extra classes or meetings, loss of position of leadership, or dismissal from the program.

_____ House Leadership. I understand that I must respect and adhere to the leadership appointed by the administration, e.g., House Managers, Assistant House Managers, Unit Coordinators, and the Intake Coordinator. I also understand that I must follow the chain of command when resolving internal issues during my participation in the program

and that contacting the Director should be reserved for emergencies and irreconcilable differences. Failure to follow this chain of command will result in a write up.

_____ Facility Vehicle Use if applicable. I understand that the use of the Facility's vehicle is a privilege, not a right. I also understand that in order to use the facility's vehicle I must provide fuel for said vehicle in accordance to the destination I am requesting transportation to at the time of the request. I also understand that none of the designated drivers are obligated to provide transportation to me and that I must request transportation in advance in order to receive it. I also understand that if I am to damage said vehicle I will be held liable for any damage I've caused do to my negligence.

_____ Employment. I understand that I am to be employed full time at a job that will allow me to fully participate in the meetings that are required of me by the program. I also understand that any hours outside of these parameters must be approved by the administration. I also understand that if I am unemployed I must be actively seeking employment during the specified hours provided in the House Rules. Failure to do so will result in a write up and possible dismissal from the program. If I am on disability and am ineligible for employment, I understand that I will be required to participate in any community service that the administration requests of me.

_____ Confidentiality. I understand that any and all information shared by other residents in the program is confidential. I also agree not to divulge information about or the location of other residents participating in the program to people not currently participating in the program.

_____ Residency. I understand that to participate in the program I am required to live on the facility's grounds and to be home by curfew every night unless out on an overnight pass approved by the administration prior to my absence. I also understand that I will be held

financially responsible for any damage I cause to the facility I am residing in.

By signing below I acknowledge that I have been informed of the above stipulations and I agree to adhere to the above listed stipulations. I understand that all rules, regulations, guidelines, protocols, policies, and procedures are subject to change by the respective administration at any given time and that this contract is binding even upon future changes to such. Failure to sign this document and to acknowledge the above will disqualify me from my participation in the program. Reach Homes also reserves the right to refuse services to anyone for any reason at any given time.

Printed Name

Date ____/____/____

Signature

REACH HOMES

ACCIDENT WAIVER AND RELEASE OF LIABILITY

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

In consideration of my participation in the programs and activities offered and operated by REACH HOMES, I hereby represent and certify that I (i) Understand the nature of these activities, (ii) Am in good health, have proper cognitive capability, and am in proper physical condition to participate in any activities or tasks the program may require, and (iii) I have not been advised against participation in any program related tasks or activities by a qualified medical professional.

ASSUMPTION OF RISK. I fully understand that the program and the activities required by the program involve inherent and other risks, hazards, and dangers that may include, but are not limited to: serious bodily injury, permanent disability, death, damage to property, and property loss, which may be caused by (i) my own actions, inaction, or negligence, (ii) the actions, inaction, or negligence of others participating in the program and its activities, and (iii) the actions, inaction, or negligence of the Releasees named below. I further understand that there may be risks either unknown or unforeseeable at this time, and I am voluntarily participating in the program and all the activities associated with the program with the knowledge of stated unknown and unforeseeable risks. I further acknowledge that by signing this waiver I assume and accept all such risks and all responsibility for any and all losses, costs, and damages that incur as a result of my participation in the program and the tasks and activities involved with said program.

RELEASE OF LIABILITY. I hereby release, discharge, and covenant not to sue REACH HOMES, its affiliates, their respective administrators, directors, officers, volunteers, employees, representatives, agents, sponsors, vendors, advertisers and, if applicable, owners and lessors of the properties, buildings, and premises on which the programs, activities, and tasks take place, each of which will be considered a Releasee hereunder, from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused, in whole or in part, by the actions, inaction, or negligence of Releasees or otherwise, and I further agree that if, despite this **Release and Waiver of Responsibility, Assumption of Risk, and Indemnity Agreement**, I make, or anyone on my behalf or their own behalf makes a claim of any type against the Releasees (including without limitation as to their negligence), I will indemnify, defend, save, and hold harmless each of the Releasees from and against any and all

loss, liability, damage, or cost, including reasonable attorney fees, which they may incur as a result of such a claim.

OTHER. I have read the foregoing **Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement**, understand that I have given up substantial rights by signing it, have signed it freely without any inducement or assurance of any nature, intend it to be a complete and unconditional release of all liability to the greatest extent allowed by the law, and agree that, if any portion of this **Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement** is held invalid, the balance shall continue in full force in effect. I understand that this **Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement** shall be governed by the laws of the State of Missouri and that any claim, lawsuit, or other legal or civil action must be filed only in the state or federal courts located in Jackson County, Missouri.

I HAVE CAREFULLY READ, FULLY UNDERSTAND, AND VOLUNTARILY SIGN THE ABOVE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT AND ACKNOWLEDGE THAT IT SHALL BE EFFECTIVE AND BINDING UPON ME, MY HEIRS, EXECUTORS, REPRESENTATIVES, AND ASSIGNS.

Participants Name (Print Legibly)

Participants Signature

Date ____/____/____