



Troy Community Coalition

Another standard of excellence within our community!

Show your commitment to keep children safe from drug and alcohol abuse by supporting the Coalition's efforts within the community. The Troy Community Coalition for the Prevention of Drug and Alcohol Abuse is dedicated to improving the quality of life for all who live or work in Troy by promoting a lifestyle free from the abuse of alcohol and drugs and its impact on behavioral health. Your contribution funds prevention programs that benefit Troy parents and educate Troy students.

- **7 Habits of Highly Effective Youth** (6th – 12th grade)
- **Choose Wisely** (4th grade)
- **DUSO the Dolphin** (Preschool)
- **Family Day** (Parents & Students)
- **Incredible Kid Recognition** (K – 6th grade w/Parents)
- **Keys to Addiction** (Parents)
- **Parents Who Host** (Parents)
- **Prayer Breakfast** (Teens & Parents)
- **Project Sticker Shock** (9th – 12th grade & Parents)
- **Rx Drug Education** (Parents)
- **Stay Out of My Room**
- **Summer Camp** (3rd - 8th grade)
- **Tar Wars** (5th grade)
- **Town Hall Meetings** (Parents)

Your \$25 contribution allows for the continuation of these and other important programs. In return, you will receive advanced notification for Coalition events, general meetings and the Coalition's e-newsletter. The Coalition office provides educational brochures, drug test kits and information on local resources. Stop by and visit us in the TSD Services Building. The Coalition would also like to take this opportunity to remind you to take the SAFE HOMES Pledge.

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_____ **YES, I want to support the Troy Community Coalition's efforts in our community and take the SAFE HOMES Pledge**

I will not allow parties or gatherings in my home when I am not present.

I will not serve nor allow youth under the legal age to consume alcohol in my home or on my property.

I will not allow the use or misuse of drugs in my home or on my property.

Parent Name(s) _____

Address _____ City _____ Zip Code _____

Email Address _____

Student Name(s) _____

Grade(s) & School(s) _____

Credit Card # _____ exp. date _____ cvv code _____ billing zip code _____

Check # _____ (Make check payable to **Troy Community Coalition**)

Please mail this form and your \$25 contribution to: **The Troy Community Coalition; 4420 Livernois Road; Troy, MI 48098**

The Troy Community Coalition is a nonprofit 501(c) (3) organization that relies on grants and donations to sustain its prevention programs. Your tax-deductible contribution will greatly help meet the challenges of substance abuse prevention in our community.