

Join Our Recovery Contact Network

To help support more alumni in early recovery, we are always expanding our recovery contact network and invite you to join this important group.

Our recovery contacts help introduce Hazelden Betty Ford Foundation alumni to their local recovery community and meetings such as AA, NA, Alanon, chapter meetings, and other activities.

To join the recovery contact network, you must be:

- Sober for six or more continuous months
- An active member of your recovery community
- Willing to be available for an initial phone call with the alumnus

As a recovery contact, you will help us ensure dignity and respect for all individuals by maintaining strict confidentiality between you and the alumnus you support.

Recovery Contact Release

I hereby give the Hazelden Betty Ford Foundation permission to use the information provided on this form for the sole purpose of inquiring about my serving as a recovery contact for alumni returning to my area. I understand that I can revoke this permission at any time, except to the extent that action has been taken in reliance on it. Hazelden Betty Ford Foundation’s Privacy Notice outlines the procedure for revocation.

By my signature, I am authorizing the Hazelden Betty Ford Foundation to give my first name, last initial, and phone number to alumni of the Hazelden Betty Ford Foundation coming to my local area. I understand that I will first be contacted by a Hazelden Betty Ford Foundation staff member before my information is shared with other alumni.

X

Signature of Recovery Contact Applicant

Date

Please print information below

Date of Sobriety _____

Date of Birth _____

Name _____
LAST FIRST MIDDLE INITIAL

Male Female

Mailing Address _____
STREET

CITY STATE ZIP COUNTRY

Email Address _____

Phone _____
AREA CODE BEST TIME TO CALL A.M. P.M.

I attend meetings and can be a contact for: AA Alanon CA EA GA NA OA SA

Please add any comments below that explain why you would be a good contact. Please make every effort to exchange names and phone numbers with each other when you are first contacted. This will make it easier to contact alumni upon their return home.

Please return this form to the Hazelden Betty Ford Foundation after you have achieved six months’ sobriety. Thank you.

Return form to: Corporate Database Team, RW19, PO Box 11, Center City, MN 55012-0011