

# Advent Recovery Ministries, Inc.

239.464.3260

17290 Rewis Road, Alva, Florida 33920-5522

Advent Recovery Ministry is the Recovery "ARM" of the Local Church

## Telephone Recovery Support Program Consent Form

I, \_\_\_\_\_, understand and agree to the following:

1. I grant permission for a staff member from Advent Recovery Ministries, Inc. to call me at the following address and telephone number to support me in my recovery.

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

2. Each time the Advent staff person calls, he/she will be asking me how my recovery is progressing and if I am in need of additional support (i.e., meetings in the area, social events, safe/sober housing, other resources)

3. At the time of the call, if I am in need of a referral to a treatment program or detox unit, I will be assisted in finding a program, if I so desire.

4. I have had the opportunity to ask questions regarding this service.

5. If at any time I decide not to take part in this service, I will call Advent at (239) 464-3260 or tell the staff person when he/she calls.

6. I have signed a written consent form authorizing \_\_\_\_\_ to speak with Advent regarding my recovery.

7. I have in no way been coerced into taking part in this service.

Please sign your name below and **return this form with your signed contract** via fax to: (866) 453-9772, or mailed or hand carried to: Advent Recovery Ministries, 17290 Rewis Rd., Alva, FL 33920-5522.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Printed)

Website: <http://www.adventrecovery.org>

E-mail: [info@adventrecovery.org](mailto:info@adventrecovery.org)



He displayed his mighty power with his arm. He scattered people who were proud in mind and heart. Luke 1:51 (ISV®)