Membership Contract

The UAB Collegiate Recovery Community is a peer-driven community of support for students in recovery from substance use disorders and other co-occurring mental health disorders. The community seeks to support and protect students’ long-term recovery through programming focused on peer support, recovery coaching, academic guidance, health and wellness activities, and leadership and service opportunities. The students, staff, and alumni of the UAB Collegiate Recovery Community hold the following values:

1. We value long-term recovery based on the principles of the 12-Step model and other abstinence-based models of recovery;
2. We value integrity, personal responsibility, and a balanced lifestyle;
3. We value educational excellence;
4. We value community, service, leadership, and diversity in every dimension of life;
5. We value lifestyles and environments that are free of alcohol, drugs or addictive behaviors. We strive to protect our own and each other’s recovery by avoiding and refusing involvement in any activity or situation that may pose a threat to our recovery principles.
6. We value and pursue health and wellness in every dimension of our lives.

The UAB CRC accepts and encourages open participation from all UAB students, staff, and alumni. To become a CRC member, however, one must meet the following criteria:

- Be an actively enrolled student of The University of Alabama at Birmingham in good standing;
- Be able to demonstrate at least six (6) months of recovery;
- Be able to demonstrate continued involvement and active participation in a community recovery program of one’s choice;
- Agree to be an active participant in the CRC by:
  - Attending at least one (1) CRC recovery support meeting per month;
  - Attending at least one (1) CRC business meeting per month;
  - Devoting at least two (2) hours per month to community leadership and/or service;
  - Completing one (1) recovery check-in meeting with CRC staff every Spring and Fall semester.
- Make a sincere commitment to living a substance-free lifestyle based on principles of long-term recovery and the values we share as a community.

Although our program borrows extensively from the 12-Step model, we are not a 12-Step program. We welcome people in recovery from all programs of recovery so long as they agree to uphold our values and are committed to living a life of sobriety and recovery. Because the CRC is not a treatment program,
we require that all members be active in communities of support and programs of recovery outside the CRC. Every effort will be made to honor and collaborate with each individual member’s choice of program of recovery.

Students who do not yet meet all these criteria or who do not wish to apply for membership are encouraged to remain engaged with the community by attending open CRC meetings, participating in CRC-sponsored social outings and activities open to the greater community, and by connecting with community members and leadership who can offer support and mentoring until eligibility criteria have been met.

Membership in the UAB CRC affords the following privileges:

- Free access to the community’s dedicated space and its shared resources;
- Access to CRC members-only activities;
- Consideration for any available sponsorship or financial support for participation in paid activities (e.g. regional CRC retreats, conferences, etc);
- Leadership training to support participation in the CRC Student Leadership Body.

The following issues constitute grounds for membership cancellation. Every effort will be made to negotiate an individualized remediation plan that would allow continued program participation:

- Behavior that threatens the integrity of the program and its dedicated space, including but not limited to behavior that can constitute a threat to one’s own and others’ recovery and long-term recovery;
- Irresponsible, inappropriate, or damaging use of program space and resources;
- Failure to fulfill the requirements for continued membership laid out in this contract;
- Failure to uphold the values of the community and the University’s code of conduct;
- Dismissal or withdrawal from the University for academic or non-academic reasons.

Disciplinary action and remediation plans are designed and considered on a case-by-case basis, as a joint effort between program staff and the student in question.

I have read, understand and agree to follow the terms of this agreement for my own wellbeing and the wellbeing of the community. I also understand that future revisions to this agreement will warrant my renewed signature to maintain my membership in the community in good standing.

Name (Print): _____________________________________________ Date: __________________

Signature: _____________________________________________ Blazer ID: _________________
Member Information Form

Student’s name: ________________________________  Preferred name: ________________________________

Pronouns: ___________________________________________  Blazer ID: ________________________________

Date of birth: ________________________________  Preferred phone number(s): ________________________________

Major: ________________________________  GPA: __________  Projected Graduation: ________________________________

How did you learn about the CRC? _________________________________________________________________

Recovery Anniversary: ________________________________

Have you ever been through treatment for a substance use disorder or other addictive disorder? Y or N
If so, check all that apply: □ IOP; □ 30-day inpatient; □ 90-day inpatient; □ Sober housing
□ Residential/Wrap-around; □ Other: ________________________________

What program of recovery do you participate in (e.g. 12-Steps, Smart Recovery, Refuge Recovery, etc.)?
_____________________________________________________________________________________
_____________________________________________________________________________________

Sponsor or Other Recovery Support (Get signed ROI for coordination of services):

Name: ________________________________  Phone Number: ________________________________

Emergency Contact (Get signed ROI for coordination of services):

Name: ________________________________  Relationship: ________________________________

Phone number: ________________________________
AUTHORIZATION FOR RELEASE OF STUDENT INFORMATION

I, _________________________________ (birthdate) __________________________
hereby authorize UAB Collegiate Recovery Community to release and obtain information to assess a student’s recovery status or if there is a concern for their safety:

To/From the following:

_______ Parents, family or other emergency contact (please list)

Name: ___________________________ Phone: __________
Name: ___________________________ Phone: __________
Name: ___________________________ Phone: __________
Name: ___________________________ Phone: __________

This consent will expire on __________________________

I understand that I have the right to revoke this authorization, in writing, at any time by sending notice to UAB Collegiate Recovery Community, 1714 9th Avenue South (Learning Resource Center 3rd Floor), Birmingham, AL 35294-1270. I understand that the revocation cannot revoke any information that may have already been sent between the original signing of this authorization and the time of the revocation.

I understand that there is a potential for re-disclosure of this information by the recipient and, if that occurs, federal law may not protect the information.

I understand that I may receive a copy of the information described on this form, if I request it. I have the right to receive a copy of this form after I sign it.

Date Signed________________ Signature of Student: __________________________

Printed name of Student: __________________________________________________

Signature of witness: ________________________________________________________

Prohibition of Redisclosure: This information has been disclosed to you from records whose confidentiality is protected by Federal Law. Federal regulations (42 CFR Part 2) prohibit you from making any further disclosure of this information except with the specific written consent of the person to whom it pertains. A general authorization for the release of medical or other information if held by another party is not sufficient for this purpose.
CRC Space Rules

1. Always clean up after yourself and your guests. Turn off coffee maker and empty it of its contents at the end of each day/evening/meeting.

2. The CRC Space is a university facility and all students, staff, and guests are asked to conduct themselves accordingly (please refer to the student code of conduct at http://www.uab.edu/students/sarc/student-conduct for more information about expectations).

3. The last person to leave for the night should always ensure the door locking mechanism is switched to the “locked” position before they leave.

4. Make sure blinds in common areas are closed at night.

5. If you do not have keycard access to the House, please sign in and out. No guest is to be left in the house unattended by staff, volunteer, or CRC member with keycard access.

6. In case of an emergency, please evacuate through the front or back door and gather either in the parking lot behind the building or across the street until help arrives and authorities deem it safe to return to the building. Staff and volunteers on duty are to ensure everyone evacuates safely.

7. In case of an emergency or other urgent situation, please contact Kristina Canfield (740-274-9100) and Benton Crane (404-520-5821) as soon as possible. If police attention is necessary, please contact the UAB Police Department at 205-934-4434. Captain Granade, who is in charge of the department’s patrol division, can be reached directly at 205-996-7610 or 205-807-9463.

I understand and agree to abide by these rules at all times in my role of student volunteer in the Collegiate Recovery Community. I understand that failure to uphold these policies may be grounds for termination of my duties as volunteer, and it may also jeopardize my membership in the Collegiate Recovery Community.

_________________________________________  ____________________________  ____________
Signature of Student                      Signature of CRC Staff                      Date

_________________________________________  ______________________________________
Printed Name                              Printed Name