

group agreement

Both participant and facilitator to retain a copy.

Facilitator's copy must be signed by the participant and kept in a secured place.

The Group Agreement contains guidelines that everyone agrees to follow in order to make the group a safe place.

1. Confidentiality

I agree to keep confidentiality. This includes not revealing who is in the group. What is discussed in the group stays in the group during and after my program. I will only discuss with my partner what relates to us and/or our family.

2. Processing Past Issues

I agree to process issues from my past that are affecting my behaviour and parenting effectiveness.

3. Taking Personal Responsibility for Life Changes

I agree to take personal responsibility for my wellbeing at the conclusion of each session. I will inform my facilitators if I need further assistance during or after the completion of the program.

4. Feelings Matter

I agree to use "I" statements instead of "you" statements, eg, "I feel", "I will" and not "you should", "you must". I agree that each person has a right to their feelings and will not be condemned for those feelings.

5. Giving and Receiving Feedback

I agree to give and receive feedback. Participation in all the processes is an important part of the program and necessary for my growth.

6. Homework/ Reflection

I agree to set aside time between sessions to complete the At Home segment, reflect and pray over my issues and (where married) to focus on my relationship with my family.

7. 7-week Commitment

I agree to make a 7-week commitment to active participation in the program. If I am absent, I understand my place in the program will be reviewed.

8. No Touch Without Permission

I agree that I will not touch another person, other than my partner, without asking and/or receiving permission.

9. Drug and Alcohol Free

I agree not to use chemicals on the premises. I agree I will not come to the group under the influence of drugs or alcohol.

I understand that should I act in any manner that would significantly prejudice the well-being or progress of any course participants, I can be required to cease attending the program.

I have read and agree with these conditions:

Signature

Name

(please print)

Date

Note: Facilitators are under supervision and may discuss the process and management of the group. Duty of care will be exercised where a person or persons property is at risk of harm.