

# ReACT Accountability Form

2024 - 2025

Name	
Participation Type (Independent ReACTor, Youth Prevention Program, ReACT Coalition)	
Grade	
Adult Advisor	

Please give your consent to be accountable for the following reACT participation aspects:

- I agree to maintain confidentiality with personal information shared during ReACT meetings or events.
- I will treat others with respect and dignity.
- I will complete or fulfill tasks that I volunteer to perform.
- I will attend events that I register for and am selected to participate in, understanding that participation may be limited and my selection may mean another student was not selected.
- Youth, parents, and youth leaders will determine obstacles to volunteer completion or attendance on a case-by-case basis.

ReACTor Signature	
Parent/Guardian Signature	
Adult Advisor Signature	

