



SAFE PLACE LOCATION AGREEMENT

Complete this form to affirm your commitment to serving Dallas County's youth in crisis.

Location Responsibilities

- Designate responsibility for Safe Place program to a management level employee (who is at least 21 years of age)
- Provide a safe environment (such as manager office or employee lounge) where the youth in crisis can wait until a Safe Place volunteer can respond
- Be supportive of the youth, relay information about the youth to the Safe Place volunteer, and keep information confidential
- Display Safe Place signage in a highly visible location and provide employees with an easily accessible Safe Place procedure sheet
- Inform all employees about Safe Place procedures

Jonathan's Place Responsibilities

- Provide at minimum one training each year for all location employees
- Provide procedure sheets for each Safe Place location
- Promptly dispatch Safe Place volunteers to assist when a request is made by a Safe Place location
- To provide signage, collateral and information as requested to all locations

Safe Place Location Fee Options

Basic Safe Place Location

\$50 per year

Benefits:

- One (1) outdoor metal Safe Place sign
- Two (2) Safe Place window decals
- 1 all-staff training
- Location listing on Jonathan's Place & Safe Place websites

Safe Place Supporter

\$250 per year

Benefits:

- All benefits prior, and:
- Two (2) outdoor Safe Place signs
- Four (4) Safe Place window decals
- One (1) mention on Jonathan's Place social media
- Listing as supporter during National Safe Place week (March 16-22)

Safe Place Partner

\$500 per year

Benefits:

- All benefits listed prior, and:
- Two (2) mentions on Jonathan's Place social media
- One (1) blog post on Jonathan's Place website
- Listing as partner during National Safe Place week (March 16-22)
- Partner listing on Jonathan's Place website

Location Information

Company/Location Name: _____

Primary Contact & Title: _____

Address: _____

City, State & Zip: _____

Phone: _____

Email: _____

Payment Information

Safe Place Fee Option: Basic: \$50 Supporter: \$250 Partner: \$500

Payment Method: Check enclosed (*payable to Jonathan's Place*) Please charge my credit card

Credit Card #: _____

Exp. Date: _____ Security Code: _____

I understand and accept the responsibilities of being a Safe Place Location.

Signature _____

Date _____