



## FAMILY-STYLE HOUSING MEMBERSHIP AGREEMENT

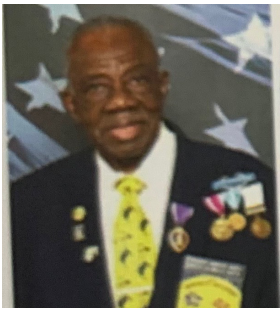
Aaron Community Cultural Center  
PO BOX 5071  
Gardena, CA 90249  
800.527.4184

[Recipient]:

\_\_\_\_\_ **I agree to all of the following household rules:**

I understand that this is a shared, **sober living**, family-style housing membership.

- I cannot have liquor or mood altering drugs or smoke on either the inside or the premise of the residence.
- I understand that I cannot physically harm any visitor or residence at ACCC while living here.
- I understand I am not allowed to have a weapon on my person or in the residence.
- I also understand that stealing and entering other family members rooms without their presence in their room is immediate grounds for dismissal at the ACCC family house.
- I understand that my room can be entered for housing inspections, repairs and emergencies.
- I understand that I will have family members as a roommate.
- I understand that when I play music, talk on my phone, or use my computer the volume must be heard in my room only.
- I understand that ACCC quiet hour is 12:00AM – 7:00AM



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Aaron Community Cultural Center



**"WE CAN: WE WILL" "READY AND FORWARD"**

- \_ I understand that all hallway lights need to be turned off between 12:00AM – 6:00AM.
- \_ I understand that there are no pet, no smoking, and no visitors.
- \_ I understand that heater and air conditioning will be turned on 1-2 hours per day.
- \_ As a member I will participate in the Green Energy program in the house that conserves water and energy.
- \_ I understand that I will not take shower longer than 10 minutes and turn off light and electrical devices when I leave my room.
- \_ I understand that I am responsible for my personal belongings and for locking my room when I leave.
- \_ I also understand that I need to buy my own trash bags, remove trash from my room and the kitchen area daily to avoid the challenge of pest living in my room and the house.
- \_ I understand that I need to clean the kitchen, the bathroom, and any common areas when I use them.
- \_ I understand that each member of the ACCC house will participate in daily and/or weekly household and yard cleaning chores.
- \_ I understand that I am responsible for taking out the trashcans weekly, as well as, sweeping and picking up trash in the yard.
- \_ I understand that as an ACCC housing member I am participating in a Life Transitioning Program. As a housing member I agree to attend all required household and individual meetings.

Signature \_\_\_\_\_



\_\_\_\_\_ I understand that I am responsible for purchasing my food and preparing my own meals. I understand that I will need to participate in a weekly housing meeting, and three or more of the members Life Transition programs. I understand that I will need to attend an educational program and/or work 20 hours per week

\_\_\_\_\_ I understand that the Los Angeles Sheriffs can search the property or my belonging with a witness.

\_\_\_\_\_ I understand that I need to provide contact information for my Social Worker, Parole or Probation Officer and two emergency contact numbers:

\_\_\_\_\_ I understand that I am on a trial for the first 5 days and if I do not follow this agreement I will be ask to move, and possibly receive assistance from the Los Angeles Sheriff.

\_\_\_\_\_ I understand that a criminal background check at the cost of \$45.00 will be run for the health and safety of the ACCC members and community.

\_\_\_\_\_ I understand any violation of the previously mentioned action are reasons for me to be ask to move immediately with a prorated monthly membership fee:

\_\_\_\_\_, 201\_\_\_\_\_

\_\_\_\_\_

ACCC Housing Member Applicant:

\_\_\_\_\_

ACCC Housing Member Representative: