



Resident Agreement

This Resident Agreement (“Agreement”) is entered into between **Encounter Grace Recovery House for Women** (“the House”) and the undersigned resident (“Resident”).

By signing this Agreement, the Resident affirms her commitment to a Christ-centered path of recovery and agrees to abide by all house rules, policies, and expectations.

1. Commitment to Recovery

- I understand that Encounter Grace is a **faith-based recovery program**.
- I commit to maintaining a drug-free and alcohol-free lifestyle.
- I will submit to random drug and alcohol testing as required.
- I will not bring any prohibited items (alcohol, drugs, paraphernalia, weapons) onto the property.

2. Spiritual Participation

- I agree to participate in daily devotionals, Bible studies, and prayer times.
- I will attend weekly church services as directed by staff.
- I will pursue spiritual growth and accountability within the Christian community.

3. Conduct & Community Living

- I will treat all staff and residents with respect, dignity, and kindness.
- I will refrain from violence, threats, abusive language, or bullying.
- I will not engage in romantic or sexual relationships with other residents during my stay.
- I will respect curfew, quiet hours, and community guidelines.

- I will participate in assigned chores and household responsibilities.

4. Confidentiality

- I will respect the privacy of all residents.
- I will not share personal stories or struggles outside the group without permission.
- I understand that leadership may be required by law to report certain disclosures (such as abuse, threats of harm, or illegal activity).

5. Disciplinary Process

- I understand that violations of rules may result in warnings, probation, or dismissal.
- I understand that use of drugs or alcohol, violence, or possession of prohibited items will result in **immediate dismissal**.

6. Financial Responsibility

- I agree to pay program fees (if applicable) on time as outlined by the House.
- I understand that failure to meet financial obligations may result in dismissal unless arrangements are made with leadership.

7. Length of Stay & Graduation

- I understand that the program is designed as a **12 month recovery process**.
- I agree to work toward program completion, including life skills development and aftercare planning.

8. Acknowledgment

By signing this agreement, I acknowledge that:

- I have read and understood the policies of Encounter Grace Recovery House for Women.
- I willingly choose to participate in this program and accept its faith-based foundation.

- I understand that failure to comply with this Agreement may result in my dismissal from the program.

Resident Name (Printed): _____

Resident Signature: _____ **Date:** _____

Staff Witness (Printed): _____

Staff Signature: _____ **Date:** _____