



SMOKING CONSENT

Leading Thunderbird Lodge requires your permission with you written consent for your youth to participate in the harm reduction program as part of their healing process. Youth will be permitted 2 cigarettes per day, at designated breaks, while they are in treatment.

I _____ DO NOT give my consent to allow
(Parent/Guardian)
_____ to smoke.
(Youth)

OR

I _____ give my consent to allow _____
(Parent/Guardian) (Youth)
to smoke.

Parent/Guardian Signature: _____

Youth Signature: _____

Dated: _____