

Abstinence Challenge

I, _____, agree to not drink alcohol, use drugs (including marijuana), or take anyone else's medicine for the next _____ days. I also will not provide drugs, alcohol or prescription medicine for anyone else during this time. I agree not to drive a motor vehicle while under the influence of drugs (including marijuana) or alcohol. Nor will I ride with a driver who has been drinking or using drugs (including marijuana).

I will come to my follow-up appointment with _____
on __/__/__.

Signed

Date

Provide a copy of this signed form to the client.