

Faith-Based Smoke-free Pledge

I pledge to protect my children and loved ones from health risks associated with secondhand smoke by making my home, vehicle and faith-based institution smoke-free.

Name of recipient

We, _____ hereby agree to support you and your pledge to be smoke-free, and will keep this
(Name of faith-based Institution)

covenant with you to remain faithful, on this date _____.

Signature of Pledgee

Signature of Family Support

Signature of Church Official

Address: _____

City: _____ SC Zip: _____

Telephone Number: _____

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