



**PARTICIPANT RULES AND
AGREEMENT**

_____ I am participating voluntarily.

_____ I have a stable residence in which to live.

_____ I understand that my participation in the Alnur Electronic Monitoring Program is Court Ordered and any violation with AEMP will be reported to the Court.

_____ I additionally understand that a violation of the home detention order or agreement may be considered an escape and subject to prosecution and imprisonment.

_____ I agree that I will be careful in wearing the transmitter and using the equipment while it is in my possession and not perform any activity that would be unsafe to me because I am wearing this equipment.

_____ I understand that if I notice the equipment is not working properly, or in the case of a natural disaster (fire, flood, storm, etc.), I will contact my AEMP case manager immediately.

_____ I will be connected to a one-piece GPS monitoring device and I agree to wear a transmitter device that is installed on my ankle, twenty-four (24) hours a day for as long as I am involved in the program. I will only allow a member of AEMP to remove it.

_____ I will be given complete instructions on the proper operation of the equipment, and will be expected to comply at all times, including charging the equipment daily.

_____ I agree that I will not submerge the transmitter in water. While bathing I must have my leg over the side of the bath tub, out of the water. While showering, I understand that I must thoroughly cleanse the area around the transmitter with soap and water, and dry underneath. I understand the transmitter, straps, and all parts of the equipment are hypoallergenic and will not cause any type of harm to my body.

_____ If the alcohol breath testing equipment is required by the courts I will not submerged this equipment since this can cause damage.

_____ I will be held civilly and criminally liable for the cost of repair or replacement of any of the equipment if tamper with or damaged in any way. **All clients are required to have a co signer who guarantees that if the client is unable to pay for the cost of repair or replacement of any of the above listed equipment, they will be held legally responsible as well.**

RESPONSIBLE PARTY _____

_____ I must provide the following to verify my identity; in possession of Court Documents, MVA issued driver's license or age of majority (Photo ID) card, employment or any other type of Photo ID card. Copies of these documents will be placed in my file at the time of enrollment.

_____ I understand that I must provide AEMP with a copy of a current phone bill and Lease/Mortgage/Renters Agreement within fourteen (14) days of my enrollment in the program. Copies will be placed in my file. If I want to move from where I am living to a new residence, I must have permission from the courts. There is a \$100 fee for moving.

_____ I agree to keep my phone and phone service working. If I do not have a working phone or if I lose phone service, I will not continue in the program.

_____ I will keep my phone ringer on all of the time. There are no excuses for having the ringer off or the phone unplugged.

_____ If my phone is not working or the phone service stops, I must contact the case manager within thirty (30) minutes. If no contact is made, AEMP will follow the procedures for a breach of curfew which may result in termination of the program.

_____ I agree and understand that AEMP, its Agents, and Employees are forever held harmless and blameless from any liability whatsoever arising from the use of the Home Detention Monitoring Systems. I give this release without any reservation of any kind.

_____ I am aware that if I have a complaint about AEMP or one of its case managers. I will submit this in writing to case manager supervisor.

_____ I agree and understand that my sentence requires me to be confined to my residence subject to the curfew schedule set by AEMP and the Court. Residence is defined as the physical building in which the client lives, and as far as the monitoring equipment allows inside of this building. It does not include basements, attics, outbuildings, garages, sheds, and land surrounding the residence.

_____ I understand that if I have a medical emergency, I must contact an AEMP case manager immediately and provide valid verification within 24 hours of leaving my residence.

_____ I agree that I will not use alcoholic beverages or drugs of controlled / uncontrolled substances unless my doctor prescribes them for me. I must provide copies of all prescriptions to AEMP.

_____ I understand that I am required to submit to random drug/ alcohol tests (urine samples and / or breath alcohol tests and such) at my own expense, at the discretion of a member of AEMP and the Court.

_____ I agree and understand that AEMP its agents, and employees will not provide me with food, clothing, shelter, medical, and / or dental care while I am participating in the program.

_____ I understand that AEMP does not discriminate against Race, Religion, Gender, Sexual Orientation, Economic Status, Origin, Etc.

RESPONSIBLE PARTY _____

_____ I irrevocably authorize AEMP its agents, and employees to communicate with and report (written and verbal) to the Court, my probation officer, and my attorney, any information pertaining to my participation in the Alnur Electronic Monitoring Program. I additionally authorize the person(s) that I have listed to have access to my file at the time of my hook-up, to be able to obtain this information.

_____ I understand that if I, or any of the above listed parties would like access to my case records, they can be obtained by submitting a written request to the AEMP office. Records are subject to a fee of \$.10 per page.

_____ I agree to provide to AEMP a copy of all correspondence related to my case that is prepared by myself or counsel directed to my court of record. (Correspondence shall include letter, Court Order or modifications thereto.) If such correspondence results in a court appearance, AEMP must be notified at least ten days prior to the court date.

_____ If an AEMP case manager is needed to appear in Court for any reason, there will be a \$100 fee for this service.

_____ I agree to submit schedules in writing by fax or email, no later than 3PM the day prior to my requested leave, or by 3PM Friday for weekend leaves. No exceptions, and no verbal requests will be accepted. I am required to call 15 minutes after submission to confirm approval.

_____ I agree to submit written verification of all activities that are performed outside of my home.

ALL ACTIVITIES MUST BE ALLOWED BY COURT ORDER.

_____ I agree to submit verification of weekly work hours. Verification should be originals or copies of pay stubs. Verification of employment must be from an independent source. I must notify AEMP immediately of any change in employment.

_____ I agree that all activities outside of home or work that are permitted and pre- approved must be verified:

_____ Religious Service: Get a bulletin with the name, address, and phone number of the place of worship. Have the service officiant sign next to the date. **Only if allowed by Court**

_____ AA/NA meetings/counseling: Name, Location, Telephone Number, Date and Time, Stamped attendance record. Only stamped meetings permitted.

_____ Personal time for activities necessary to maintain the household and/or personal hygiene: Receipts with Date and Time, Signed and Dated Business cards. **Only if allowed by Court.**

RESPONSIBLE PARTY _____

_____ I agree that if I am allowed to participate in any of the above activities, I am to use the following time guidelines:

- Religious service: Permitted to attend one service per week for a maximum of 4 hours, including travel. This must take place between 8:00am and 7:00pm.
- AA/NA meeting/counseling: Permitted 2 hours to attend one meeting per day, and must return home and be in range by 11:00pm.
- "Personal Time": Permitted a maximum of 4 hours, including travel time, one time per week, between the hours of 8:00am and 7:00pm.

_____ All allowable activities are at the discretion of AEMP and activities may be revoked at any time.

_____ I understand that when I leave my home I must immediately and directly report to my authorized destination, and return immediately home when my business at this location is completed.

_____ I understand that there are special holiday restrictions on all activities/outings. I will be notified in writing prior to each holiday of these restrictions.

_____ I understand that I am required to report to the offices of AEMP at a minimum of every two weeks. I understand that these appointments are required, and if I do not abide, I can be violated from the program. AEMP reserves the right to require any client to report to the office on a more frequent basis.

_____ I understand that I must spend a MINIMUM of six (6) consecutive hours within a twenty four (24) hour period in my home, regardless of employment. I am not permitted to work more than eighteen (18) hours in a twenty-four (24) hour period, including travel time.

_____ I understand that I am not permitted to be away from my home for more than twenty-four (24) hours. If I am away from my home for more than twenty-four (24) hours, a letter of violation will be sent to the appropriate authorities.

_____ I understand that at all times while in the AEMP office, myself and any persons that are accompanying me may be audio and video recorded. I authorize AEMP to do so.

_____ I, being of sound mind and body, have read or have had read to me, the terms and conditions of the A. I understand that all rules and regulations are subject to change. I fully understand all terms and conditions, and agree to abide by these rules and regulations.

Client signature	Date	AEMP Representative
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Responsible Party	Date
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