

Sample Letter to Parents/Guardians

(Date)

Dear Parent/Guardian:

More than 480,000 people in the U.S. die each year of tobacco-related causes. Another 50,000 kick the habit and stop smoking. These numbers pose a serious problem for tobacco companies. How do they replace these former smokers?

The tobacco industry spends millions of dollars on advertising directed to children and adolescents. The advertising works: 3,800 children start smoking each year in Minnesota. This isn't just kids experimenting – nine in ten adult smokers started before they were 18.

The tobacco industry spends more than \$150 million a year promoting its deadly products to children in Minnesota alone. Due to limitations on advertising, most of this money goes to advertising and promotion in your neighborhood gas stations, convenience stores, gas stations, and other retailers.

(Name of organization/school) is working to raise community awareness about this problem. This program teaches our children about the harms of tobacco and the advertising meant to entice them to become smokers. The program includes a survey in your neighborhood stores to determine exactly how much tobacco advertising our children are exposed to, and then educating the community on what the students learned. We have asked your child to participate in this project, pending your permission.

As a student working on this project, your child will learn the basics of tobacco's harms and then travel to a number of neighborhood stores to complete a survey. They will use what they learn to participate in educating the community. Participants will be working with a group of other students and an adult advisor (insert name of staff member) to complete this program.

If you give your child permission to participate in the program, they will be required to attend (weekly) meetings that will be held at (insert location) at (insert time).

(Optional: We also invite your participation. We are looking for safe, insured drivers who can help survey stores. Please indicate on the permission slip whether you are interested.)

If you have any questions, please give me a call at (coordinator's phone number).

Sincerely,

(Name of Coordinator) & (Title)

Sample Parent/Guardian Permission Form

I give _____ permission to participate in tobacco education and survey program held by (name of organization/school). This program involves an educational activity of surveying tobacco advertising and other marketing practices found in various tobacco retail outlets. The purpose of the survey is to analyze the amount and effects of tobacco product advertising and other marketing practices in our community. I understand that this child may be involved in other educational components of this program on a later date.

I release (name of organization/school) from liability involved from this child participating in the survey and related program activities.

Student name: _____

Address: _____

Phone: _____

Parent/guardian name: _____

Parent/guardian signature: _____

Date: _____

Sample Driver's Certification Form*

*Optional: Use if parents/guardians will be driving the students to the store locations

Please check if the following apply to you:

_____ I am the parent/guardian of a youth who will be riding with me

_____ I have not had a moving violation on my driver's license in the past three years

_____ I certify that I am a licensed and insured driver

_____ I will require that all occupants in my car wear seat belts at all times

Parent/guardian name: _____

Address: _____

Phone: _____

Parent/guardian signature: _____

Date: _____