



SMILE STATION AFFILIATION AGREEMENT

Please have someone who will be a constant contact person fill out this application.
For example, if you are at a college, please ask your faculty advisor to complete this application.

CONTACT PERSON

Name
Phone
Email

LOCATION OF SMILE STATION

Type of Location
(College, library, etc.)

Full Address

NAME OF SMILE STATION

Proposed Name
(Delaware Valley Smile Station)

_____ Smile Station

Proposed Email
(Delvalsmilestation@gmail.com)

_____@gmail.com

I. PURPOSE

This Smile Station Affiliation Agreement is made and is effectively by and between _____, a group of people who will maintain the ideals of the Smile Stations, and the Turn-A-Frown Around (TAFE) Foundation, Inc. This Agreement shall be effective upon the signing of this document by both parties and will remain in effect until terminated by written notice by either party for noncompliance with the terms of this agreement.

II. AGREEMENT TERMS

This proposed Smile Station agrees to:

A. General Requirements

1. End loneliness in local nursing homes, psychiatric hospitals, treatment and rehabilitation centers, and related facilities.
2. End loneliness systematically, e.g., ending loneliness in one nursing home before moving on to another nursing home.
3. Strive to represent TAFE in a positive light and uphold the ideals the organization has set forth.
4. Respect the ideals put forth in the Smile Station Manual and abide by the rules in the facilities members are visiting.
5. Accept advice, suggestions, and any alterations from TAFE should the organization have input.
6. Be open-minded and involve everyone in the community to join the chapter.



- B. Fundraising
 - 1. Accept the responsibility of following all laws and regulations of their state and municipality if any fundraising efforts are taken.

- C. Ongoing Communication
 - 1. Provide feedback regularly when asked by TAFE in the form of email, survey form, and/or phone calls.
 - 2. Maintain an email address that is consistently checked in order to receive updates, suggestions, and nationwide events for the chapter to participate in.

- D. Record Keeping
 - 1. Maintain a list of contacts in their Gmail account of those who join the Smile Station as Forever Friends, who are interested, and/or who believe in the mission.
 - 2. Maintain weekly contact with the Forever Friends through the use of general meetings, emails, phone calls/texts, and/or journal forms.
 - 3. Appoint a Smile Station Coordinator to retrieve the Forever Friend Tracking Sheet from facilities and scan to TAFE on a monthly basis.

- E. Perpetual
 - 1. Exist from year to year, even if coordinators are no longer available. Coordinators will appoint a new coordinator before leaving the Smile Station.

TAFE agrees to:

- F. Benefits
 - 1. Provide access to the Smile Station Manual, a handbook that outlines the founding and operations of the Smile Station.
 - 2. Provide guidance from TAFE and other Smile Stations.
 - 3. Authorize the utilization of TAFE logos, materials, expressions, and more in the operations of the Smile Station.

By signing below, I agree to oversee the local Smile Station in accordance with the above affiliation agreement.
Smile Station Contact Person: _____ **Signature:** _____ **Date:** _____
TAFE Contact Person: _____ **Signature:** _____ **Date:** _____