

JOIN THE EFFORT

to strengthen the City of Fort Worth's smoking ordinance to protect all workers from the proven health hazards of secondhand smoke.

YES! I/We want to be involved!

Please list me/our organization on ordinance materials as noted below:

Our primary contact should be:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

OUR INVOLVEMENT WILL BE: (check all that apply)

AS AN ACTIVE PARTNER

(decision maker who does a significant part of the work)

- List your name publicly as a supporter
- Participate and take responsibility for a portion of this effort
- Recruit new coalition members
- Organize our volunteers/members/employees to take action on this effort
- Other _____

AS AN ACTIVE SUPPORTER

- List your name publicly as a supporter
- Call us for speakers and experts as needed (City Council meetings, town hall meetings, etc.)
- Keep us updated on progress

Signature: _____

I SUPPORT A SMOKE-FREE FORT WORTH!

**SMOKE-FREE
FORT WORTH**

A coalition in partnership with Smoke-free Texas.

Find out more on our website: www.SmokeFreeFW.org

For more information about Smoke-Free Fort Worth, email:

info@smokefreefw.org