

# SUICIDE CONTRACT

I, \_\_\_\_\_, promise to  
\_\_\_\_\_, a Peer Support  
team member, that I will not kill myself  
until \_\_\_\_\_ (3 weeks  
from today) and that I will have a behavioral  
health professional contact this team  
member to advise him/her that I have  
obtained proper care.

\_\_\_\_\_ Signed

\_\_\_\_\_ Witness

\_\_\_\_\_ Date