



Smoke Free Rowan Campaign Application

Dear Smoke Free Rowan Campaign Coordinator:

_____ (business/organization name) has a policy prohibiting smoking inside our facilities that applies to all employees, clients and visitors. We would like to join Smoke Free Rowan's campaign that encourages businesses and organizations in Rowan County to voluntarily adopt a smoke-free policy.

We understand that Smoke Free Rowan's vision is for Rowan to become the first county in North Carolina where all businesses and organizations have freely chosen to be smoke-free.

As a member of the Smoke Free Rowan campaign, we will:

- Allow our business/organization to be listed on Smoke Free Rowan educational and promotional materials such as campaign flyers and website
- Encourage other businesses and organizations to voluntarily adopt an indoor smoke free policy and join the campaign
- Bring to Smoke Free Rowan's attention any businesses or organizations that Smoke Free Rowan should approach to join the campaign

Business/Organization Name: _____

Point of Contact Name (print): _____

Signature: _____

Address: _____

Phone: _____

Email: _____

Date: _____

Smoke Free Rowan
c/o Ruth Whedbee
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