

I Quit! Contract

I, _____ agree to stop all cigarettes on

(Name)

_____ at _____
(Day/date) (Time)



I have many personal reasons for wanting to quit,
including:

I hereby state my personal commitment to work very hard, to use new skills and to remain an ex-smoker.

Signature

Date

Signature of Witness

Date

Signature of Witness

Date



I Support You! Contract

I, _____ agree to support

(Name)

_____ during his/her quitting process.

(Name)

I agree to listen and to be positive and understanding.

I agree to support him/her because I believe in him/her and I believe in his/her ability to quit smoking.

I agree to support him/her by

Signed _____ Date _____

Adapted from *Stop Smoking: A Cessation Resource for Those Who Work With Women*, Canadian Public Health Association. 2006.