HEALTHY SOUTH DAKOTA

Live Better. Grow Stronger.

www.healthysd.gov

Register Your Organization Today!

Complete the form on the reverse side of this page and fax it to our Tobacco Cessation Coordinator at fax no. 605 347-5223

or mail the form to:

Tobacco Cessation Coordinator
2885 Dickson Drive
PO Box 218
Sturgis, SD 57785
Phone 605 347-4467 ext. 226

Submit the form today!

Your organization will be featured on the website below.

http://www.healthysd.gov/TobaccoFreeBiz.html

Check back often to see how we're promoting tobacco-free and smoke-free places to live, work, and play.

South Dakota Department of Health

Registration for Tobacco-Free and Smoke-Free Organizations

The South Dakota Department of Health recognizes organizations that have *voluntarily* chosen to be tobacco-free or smoke-free even though they are exempt under the state's Clean Indoor Air Law. A listing of such organizations is posted on the department's www.healthysd.gov web site. If your organization is tobacco-free or smoke-free, even though you are not required to do so by state law, and you would like to be included on the listing, please complete the following information and fax the form to fax no. 605-347-5223 or mail the form to: Tobacco Cessation Coordinator, 2885 Dickson Drive, PO Box 218, Sturgis, SD 57785. If you have questions about this project, please feel free to call 605 347-4467 ext. 226.

My organization is a:

- ☐ Bar/Lounge
- ☐ College/University/Technical Institute
- ☐ Elementary/Middle/High School
- ☐ Healthcare Facility
- ☐ Hotel/Motel
- ☐ Parks/Outdoor Venues
- ☐ Restaurant/Dining Establishment
- ☐ Other _____

Please Select Only One of the Following Options

1. To be included on the **Tobacco-Free** listing, your organization must have a written policy stating that the property/campus is completely tobacco-free at all times for all employees, visitors, etc.

Yes, my organization meets the description above. I will notify the Department of Health, Tobacco Control Program, if it changes. Please add my organization to the www.healthysd.gov list.

Organization Name:_____

City: _____

Signed: _____ Date:_____
(Authorized administration personnel / owner)

2. To be included on the **Smoke-Free** listing, your organization must have a written policy stating that the entire property is completely smoke-free OR that the indoor area is completely smoke-free, even though the current state law permits smoking in your facility (such as a place that serves alcohol or has video lottery). "Completely" means the entire indoor facility is smoke-free at all times for all employees, visitors, etc.

Yes, my organization meets the description above. I will notify the Department of Health, Tobacco Control Program, if it changes. Please add my organization to the www.healthysd.gov list.

Organization Name:_____

City: _____

Signed: _____ Date:_____
(Authorized administration personnel / owner)