

SCRAM CAM Program Participant Agreement



Participant Name

Agency

Agent Name

Date Placed on Program

I, _____, have been placed in the SCRAM Program. As a condition of being allowed to participate in this Program, I agree to comply with all Program requirements set forth in this Agreement and to strictly follow the instructions of my Probation Officer or Pre-trial Services Agent. I understand that any failure by me to comply with this Agreement or the instructions of my officer or agent will be considered a violation of my supervision and may result in adverse legal consequences.

As a condition of my participation in the Program, I agree to properly use the Secure Continuous Remote Alcohol Monitoring® ("SCRAM") equipment provided to me by my officer or agent. In that regard, I will wear the SCRAM CAM Bracelet on my ankle for the duration of the Program. I will allow the SCRAM Base Station to be connected to my home or office telephone unless I have reached an agreement with my officer or agent. I understand that the SCRAM CAM Bracelet will, at pre-programmed intervals, test me for the presence of a positive blood alcohol concentration by the measurement of alcohol that is being emitted as vapors through my skin. When the SCRAM CAM Bracelet detects the presence of alcohol, it will record a positive reading and will transmit an alcohol alert to the SCRAM Base Station. The SCRAM CAM Bracelet also contains systems designed to detect interference or tampering and will also transmit a tampering alert to the SCRAM Base Station. When maintenance is required, I agree to come into the office within 48 hours after being notified by my agent.

I acknowledge receipt of:

SCRAM CAM Bracelet Number	Initial Here
SCRAM Base Station Number	
1 Power Cord and Phone Cord	_____

I understand that I may be required to pay the daily cost of my SCRAM monitoring. If so ordered, I agree to pay the following cost per day on a schedule set forth in a separate payment agreement and will submit payments as directed by my officer or agent:

Daily Monitoring Cost	Initial Here
Hook Up Fee	
Additional Hook Up	_____

The additional hook up fee will be assessed if a new bracelet is required as a result of cut strap, submersion, or intentional damage to the bracelet components. I also understand that I will be held responsible for damage, other than due to normal wear, to the SCRAM equipment. I also understand that if I do not return the equipment in good working condition, I will be charged for the repair or the replacement of the equipment as follows:

Full Replacement of the SCRAM CAM Bracelet	\$1400.00	Initial Here
Full Replacement of the SCRAM Base Station	\$700.00	
Straps Replacement	\$175.00	_____

As a condition of being allowed to participate in the Program, if required, I agree to pay these costs. And, I agree to allow authorized personnel to inspect and maintain the SCRAM CAM Bracelet and SCRAM Base Station.

While participating in the Program, I agree to wear a non-removable SCRAM CAM Bracelet that will be attached by my agent, officer, or other authorized agency personnel. I agree not to remove, tamper with, or place any obstruction material between the SCRAM CAM Bracelet and my leg. Only in an emergency or with the prior permission of my officer or agent will I remove the SCRAM CAM Bracelet. I also agree not to move, disconnect, or tamper with the SCRAM Base Station without the prior approval of my agent.

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I agree to maintain an analog telephone line and electrical service in my residence at my own expense. I agree that I will not make any changes in the telephone equipment or services at my residence without prior approval of my agent. If notified by my agent or officer, I agree to remove any telephone features or functions that interfere with normal operation of the SCRAM Base Station. I agree to provide copies of my monthly telephone and electric bill when requested by my agent or officer.

I understand that my officer or agent will use telephone calls, the SCRAM equipment, and personal visits to monitor my compliance with this Agreement. Therefore, when I am at home, I agree to promptly answer my telephone or door. I further understand and agree that all telephone calls from my officer or agent to my residence may be tape-recorded.

Reporting Schedule: I understand that my daily SCRAM equipment reporting times are as follows:

If I experience problems with the SCRAM CAM Bracelet or SCRAM Base Station, or if I lose electrical power at my residence, I agree to call my agent immediately. If I am unable to speak to my agent in person, or during non-business hours, I agree to call my agent and leave a message on their answering machine including my name, the date, the time, and the nature of my problem. If there has been a power problem, I agree that I will call and leave another message when the power is restored. I also agree to notify my agent of any problems with my telephone service as soon as I am able to do so.

I understand that as a participant in the Program that I am to abstain from any and all alcohol consumption and to avoid the use of products containing alcohol and to avoid certain restricted activities, as described as follows:

Initial Here **Health and Safety Notice:**

WARNING. Improper installation of this SCRAM device may cause injury. Refer to Health and Safety Notice at end of document and follow instructions to avoid injury.

I verify that I read the Health and Safety Notice at the end of this document and my officer or agent has given me the opportunity to ask questions. I agree to consult a doctor if I have any pre-existing medical conditions related to my legs, ankles, or feet. Such conditions include, but are not limited to circulation problems, neuropathy, deep-vein thrombosis, leg ulcers, tendonitis, diabetes, pregnancy, a history of swelling, or nickel or metal allergies. If my doctor believes that a pre-existing condition prevents me from wearing the bracelet, I will immediately notify my agent.

Initial Here In the event of a serious side effect such as sores, open wounds, bruising, or severe irritation or redness, I agree to immediately contact my agent for further instructions and seek medical attention if needed. In the event of a medical emergency or safety issue, I agree to cut the strap and remove the bracelet then contact my agent.

Health and Safety information is available at www.scramsafety.com.

Initial Here **Banned Products:**

I understand that I am not to use or possess any product containing alcohol, including, but not limited to: mouthwash, medicinal alcohol, household cleaners and disinfectants, lotions, body washes, perfumes, colognes, or other hygiene products that contain alcohol. No products other than soap and water should be used on the skin around the bracelet.

Initial Here **Tampering:**

I understand that the use of banned products, substances, or any topical application of a product near the SCRAM CAM Bracelet in an attempt to tamper with or alter its readings will be considered a violation of this Agreement.

Initial Here **Occupation and Work Hours:**

I understand that I am to provide my agent with my current employment, occupation, and work hours, and to also inform them of any changes to this information.

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Initial Here **Swimming & Bathing:**

_____ I understand that I am not to submerge the SCRAM CAM Bracelet in water. Showers are the only permitted bathing method. I understand that if I submerge the SCRAM CAM Bracelet in water it will be treated as an attempt to tamper with the device for the purpose of circumventing alcohol tests. I understand that I will be held liable for any damages caused by submerging or damaging the SCRAM CAM Bracelet as well as for additional hook-up fees when new equipment is required due to intentional damage.

Initial Here **Personal Hygiene:**

_____ To reduce the likelihood of side effects, I agree to clean around and underneath the bracelet each day as part of a shower using mild soap and water, to rinse thoroughly and dry, and to inspect the area for skin redness, sores, or bruising.

Initial Here **Monitoring Technology:**

_____ **Collection and Use of Information and Purpose:** The SCRAM CAM Bracelet contains technology that detects alcohol as well as device tampering. The purpose of the collection and use of information obtained from the device is to determine if the wearer of the device has consumed alcohol and/or if the wearer of the device has tampered with the device in an attempt to interfere with the device's ability to detect alcohol. Identification information you provide will be used by SCRAM Systems, its subsidiaries, contracting agencies, and providers for the purpose of determining your compliance or non-compliance with court-ordered or voluntary alcohol monitoring. SCRAM Systems will not use or disclose your personal identification information for any other purpose without your consent.

Initial Here **Retention and Destruction of Personal Identification Information:** SCRAM Systems will retain all personal identification information obtained from you in a manner consistent with federal and state laws. SCRAM Systems will destroy your personal identification information when it is no longer required to a) document your compliance with the terms of your court-ordered or voluntary alcohol monitoring or b) document SCRAM Systems' performance of such monitoring in furtherance of its legal obligations or to resolve disputes, whichever is longer, or unless another retention timeframe is required by law.

Initial Here **Consent to the Collection and Use of Personal Identification Information:**

_____ I understand that SCRAM Systems will collect and use my personal identification information during the period in which I am monitored by the CAM device for the purpose stated above, and I hereby consent to the collection and use of this information by SCRAM Systems.

Initial Here **Consent to Retention and Destruction:**

_____ I understand that SCRAM Systems will retain and destroy my personal identification information as stated above and I hereby consent to this retention and destruction and waive any rights I may have to request destruction of my personal identification information during this timeframe.

SCRAM Systems Privacy Policy: <https://www.scramsystems.com/privacy-policy/>

I acknowledge that I have received a copy of this Agreement and that it has been explained to me before signing. I understand that I must comply with the requirements of this Agreement until notified otherwise by my probation officer or pretrial services agent. I agree to call my officer or agent immediately if I have any questions about this Agreement or if I experience any problems with the SCRAM CAM Bracelet or SCRAM Base Station. I further understand that any violation of this Agreement will constitute a violation of the Program and may cause immediate adverse legal action to be taken against me.

Participant 1

Date

Field Representative/Witness

Title

Date

HEALTH AND SAFETY NOTICE FOR SCRAM SYSTEMS PRODUCTS

MEDICAL WARNINGS

- Certain medical conditions may prevent you from wearing a SCRAM Continuous Alcohol Monitoring® (SCRAM CAM®), SCRAM House Arrest®, or SCRAM GPS® bracelet. If you have experienced or been diagnosed with any of the following conditions, you should consult a doctor before attempting to wear any SCRAM Systems bracelet:
 - Circulation problems
 - Neuropathy
 - Deep Vein Thrombosis
 - Leg ulcers
 - Tendonitis
 - Diabetes
 - Pregnancy
 - History of Swelling
 - Nickel or other metal allergies
- Some side effects may occur when beginning to wear a bracelet even if you have not experienced any of the conditions above. If you experience any of the following conditions, you should immediately contact your supervising authority for further instructions and seek medical attention if needed.
 - Sores
 - Open wounds
 - Bruising
 - Severe irritation or redness

MEDICAL EMERGENCIES

- Immediately **cut the strap** and remove the bracelet if a medical emergency or safety issue occurs. Then contact your supervising authority.

COMPATIBILITY WITH MEDICAL DEVICES

- SCRAM products may not be compatible with medical devices such as pacemakers or other implanted medical devices. Consult with your healthcare provider before using a SCRAM product. Technical specifications are available upon request.
- MRI and other medical equipment may produce magnetic fields that may not be compatible with SCRAM products. Always inform the medical equipment operators if you are wearing any SCRAM Systems bracelet.
- Medical alert systems may not function or call for help when a SCRAM Base Station is used. Consult your medical alert system provider to determine if the wired SCRAM Base Station or wireless SCRAM Base Station will affect it. Technical specifications are available upon request.

GENERAL SAFETY INSTRUCTIONS

- Do not use SCRAM Systems products in environments where explosive vapors may exist.
- Follow your employer's rules to avoid any hazards of wearing SCRAM Systems bracelets when working around machinery or ladders.
- Immediately **cut the strap** and remove the bracelet if you suspect its battery has leaked. Wash affected area and clothing. Then contact your supervising authority.
- Do not submerge the SCRAM Systems Bracelet under water.

PERSONAL HYGIENE

- If you are wearing any SCRAM Systems bracelet, clean around and underneath the bracelet each day as part of a shower. Use mild soap, rinse thoroughly, and dry. Inspect the area for skin redness, sores, or bruising. Do not submerge the SCRAM CAM Bracelet under water.
- Breath tubes for SCRAM Remote Breath® come sealed in sanitary packages. Do not use a breath tube if not received in a sanitary package. Clean breath tubes periodically with soap and water or in a dishwasher. Obtain new tubes as needed from your supervising authority.

PRECAUTIONS AND INSTRUCTIONS FOR INSTALLERS

- Wear gloves and a facemask when installing bracelets or when handling bracelets that have not been cleaned and disinfected. This will minimize the risk of contracting communicable diseases.
- Do not install SCRAM Systems bracelets too tightly. The wearer should easily be able to insert their fingers between the bracelet and skin in order to clean underneath.
- Properly clean and disinfect all SCRAM Systems bracelets before installation using instructions provided on the SCRAMNET Help Page.
- Replace SCRAM CAM and SCRAM House Arrest bracelet batteries as recommended by SCRAMNET or SCRAM Systems Customer Service. Always use 3V lithium CR2 batteries in SCRAM CAM or SCRAM House Arrest Bracelets.
- Do not reuse or attempt to recharge SCRAM CAM or SCRAM House Arrest batteries.
- Replace wired SCRAM Base Station, wireless SCRAM Base Station, and SCRAM Remote Breath batteries when they no longer hold a charge. Always use replacement batteries provided by SCRAM Systems.
- Do not attempt to replace a SCRAM GPS bracelet battery.