



**Crossroads Centre, Antigua**  
**P.O. Box 3592, St. John's,**  
**Antigua, West Indies**  
**Telephone: (268) 562-0035**  
**Fax: (268) 562-3278**

Please read the information contained in this package and direct any questions to the admissions department at Crossroads Centre.

**The general admissions package includes:**

- Immigration Department Policy
- Treatment Costs and Payment Options
- Credit Card Authorization Form
- Suggested List of Items to Bring
- Items to Leave at Home
- Frequently Asked Questions
- Ground Rules for Recovery
- Conditions of Admission
- Family Program Information



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### **Immigration Department Policy**

Prior to your arrival at Crossroads Centre, we wish to make you aware of the Antigua Immigration Department Policy. Crossroads is located in the country of Antigua and therefore it is necessary that Crossroads work with the Immigration Department to ensure the safety of each client. Upon your arrival to Antigua you will pass through Immigration as is the case with any visitor to the island. United States citizens require a valid passport to travel. Canadian or U.K. citizens will need to present either an original birth certificate with photo ID or a valid passport to enter the country. Please see **Travel Requirement information listed on page 5.** Please inform the Immigration Officer of your plans to go to Crossroads at which time they will award you sufficient days approved to stay on the island, which is based on the 29 days or six-weeks that you will need to successfully complete the Crossroads program. When you inform Immigration that you are coming to Crossroads, the Immigration Officer will allow the Crossroads driver to enter the customs security area to assist you.

If for any reason a client should decide to leave treatment prematurely, the Immigration Department will be notified to assist in the departure from Antigua and to ensure the safe return of each client to their previous destination. When necessary, a client will be directed to the nearest United States port if he/she is unable to travel immediately on the previous travel itinerary.

In addition, please be advised that it is ***strongly discouraged*** that any client completing treatment at Crossroads, continue to remain on island beyond their estimated date of discharge. Your Immigration documents will only be approved until the date of discharge from Crossroads. Upon successful discharge from Crossroads, the Crossroads driver will escort each client back to the airport to meet their scheduled return flight. Also, please be aware that a \$28 US departure tax will be collected after check-in at the V.C. Bird International Airport.

We appreciate your understanding and cooperation. If you have any questions or concerns regarding this matter, contact the Admissions Department at Crossroads Centre, Antigua.



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**TREATMENT COSTS AND PAYMENT OPTIONS**

**29- day residential treatment program ..... US \$24,000.00\***

**Six-week residential program ..... US \$31,000.00\***

**\*Plus Medical deposit ..... US \$500.00**

The medical deposit is required for ancillary or emergency medical expenses. Any unused funds from this deposit will be refunded following discharge and reconciliation of accounts.

Treatment costs are inclusive of:

- All routine detoxification services and medications;
- All in-house medical services provided by our medical staff;
- All treatment and counselling services;
- All complimentary therapies
- Family program participation for adult family members/ significant others.

**Please note: We require a \$500 security deposit to secure an admission date. In the event of a cancellation, the \$500.00 pre-admission deposit is non-refundable.**

**Note: Full payment must be received prior to admission.**

**1. Wire Transfer Instructions**

Directions: Give the following information to your bank for money transfer. You must also provide Crossroads Centre with written confirmation ensuring that your name and the routing number are included.

For wire transfers originating within the U.S.A.:

City National Bank of Florida  
 1000 Brickell Avenue  
 Miami, Florida 33131  
 Tel: 305-371-5380

ABA # 066004367

Beneficiary Account: **10004004303**  
 Beneficiary Name: **Crossroads Incorporated**

For wire transfers originating outside of the USA:

Standard Chartered Bank  
200 Vessey Street, No. 23  
New York, NY 10285  
Tel: 212-415-9500

Swift Code: SCBLUS 33

Beneficiary Bank: City National Bank of Florida  
1000 Brickell Avenue  
Miami, Florida 33131  
Tel: 305-371-5380

FCT # CNBFUS3M  
ABA # 066004367

Beneficiary Account: **10004004303**  
Beneficiary Name: **Crossroads Incorporated**

2. **Certified cheque or money order** made payable to Crossroads Centre, Antigua. Personal or business cheques will not be accepted. A copy of the certified cheque must be faxed to Crossroads at least one (1) business day prior to admission.
3. **VISA, MasterCard, American Express or Discover:** Credit cards will be processed a minimum of two (2) business days prior to admission. We must receive written authorization from the cardholder in order to process credit cards.

**Directions:**

1. Cardholder must complete and sign the Credit Card Authorization Form
2. Fax the above document to Crossroads Centre in c/o the Admissions Coordinator (268) 562-3278.



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## CREDIT CARD AUTHORIZATION FORM

-PLEASE PRINT LEGIBLY-

I \_\_\_\_\_, (Please Print Name as It Appears on Card) hereby authorize Crossroads Centre, Antigua to charge the following credit card:

Visa MasterCard American Express Discover (Check Appropriate Box)

Card Number: \_\_\_\_\_

Card Expiration Date: \_\_\_\_\_

Card Security Code: \_\_\_\_\_

Name of Issuing Bank of Card: \_\_\_\_\_

In the amount of \$\_\_\_\_\_ U.S. dollars, towards residential program services pertaining to the admission of:

(Client name): \_\_\_\_\_ . Scheduled for admission

On (date): \_\_\_\_\_

I understand that the \$500.00 security deposit is **non-refundable** in the event of cancellation. **I further understand that subsequent to admission, all charges except for the five hundred dollar (\$500) medical deposit are completely non-refundable.**

Cardholder Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Tel: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*In order to reserve your bed for the specific date discussed, this completed form must be returned by fax to 1-268-562-3278 within 48 hours of completing the phone interview.*

**Intended Method of Payment for the remaining cost of treatment will be:**

\_\_\_\_\_



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## **SUGGESTED LIST OF ITEMS TO BRING**

*All luggage items brought into Crossroads Centre will be examined at admission. Staff reserves the right to remove items that are deemed inappropriate for treatment.*

### **TRAVEL DOCUMENTS**

**All persons entering Antigua and Barbuda must have an onward or return ticket and valid proof of citizenship.**

#### **Proof of Citizenship**

**United States Nationals** require proof of citizenship in the form of a valid passport.

If you need a passport quickly, there are a number of private organizations that offer expedited service within 1-3 business days. Some websites are located below.

**American Passport Express:** [www.americanpassport.com](http://www.americanpassport.com) 800 841-6778

**Expert Visa Services:** [www.expertvisa.com](http://www.expertvisa.com) 312 663-6667

You may also contact the **U.S. National Passport Information Center (NPIC)** at: 877 487-2778 and inquire about their same day service (with appointment).

If you need a passport and can wait two weeks or longer, contact the **U.S. Department of State:** [www.travel.state.gov/passport](http://www.travel.state.gov/passport)

Canadian and United Kingdom Nationals **must present one of the following to be allowed entry into Antigua:**

1. Valid Passport, **OR**
2. Original Birth Certificate **with** government issued photo ID (i.e. driver's license), **OR,**
3. Notarized Copy of Birth Certificate (i.e. with a raised seal) **with** photo ID

*NOTE: If you cannot locate the Original Birth Certificate, you can take a copy to any Lawyer to get it Notarized with a raised seal. If travelling via the United States persons must have a valid passport.*



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## **SUGGESTED LIST OF ITEMS TO BRING**

### **Clothing**

Bring with you comfortable, casual, cool, easy to launder clothes including: shorts, T-shirts, pajamas, light weight robe, slippers, exercise clothing, running shoes, sun hat, sunglasses, one piece swim suit, swim cover up, and comfortable shoes or sandals. Please note that clients will not be permitted to wear clothing that is in the clinical team's perception, revealing, tight or in any way inappropriate for the treatment setting.

### **Toiletries**

Sunscreen, toothpaste, toothbrush, razors, bar soap, deodorant, shampoo, contact lens solutions, insect repellent, feminine hygiene products etc.

### **Money**

It is recommended that you bring the equivalent of approximately \$400 (USD) for incidental charges, additional literature and miscellaneous items. Our gift shop also supplies limited toiletries, recovery literature, small souvenirs, and gift items. We advise individuals traveling to Antigua to bring with them a valid credit card, traveler's cheques, and/or an out of country health insurance card for use in case of a medical emergency.

### **Medications**

If you are taking approved prescription medications, please bring a 45- day supply with you. All medications are subject to review while you are in treatment and will be stored and administered by medical staff. Medications considered contra-indicative to recovery will not be returned at time of discharge. **If you have any questions about medications that will not be continued while in treatment, contact the Admissions department prior to your admission.**

### **Smoking**

We at Crossroads believe that nicotine dependency is a serious and harmful addiction. We will encourage clients to address this addiction as part of their recovery plan. Our staff will discuss alternative means of dealing with nicotine withdrawal and how to effectively manage a smoke-free lifestyle. All buildings at Crossroads are non-smoking. A designated smoking area is provided outside for those who decide to continue smoking. If you choose to continue smoking, you are reminded to bring sufficient cigarettes for your first week of treatment and additional cigarettes can be purchased by staff off-site. Cigarettes are the only accepted tobacco product and they must arrive in their originally sealed packages. No cigars or chewing tobacco are allowed.



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### **ITEMS TO LEAVE AT HOME**

- Alcohol, or non-prescribed drugs including vitamins, herbs or over the counter medications
- Alcohol-based products (i.e. mouthwash, aftershave, perfume)
- Weapons of any kind-including pocketknives, blades etc.
- Expensive jewelry or large sums of money. We encourage individuals to secure any items of value in the safe until discharge.
- Alcohol/tobacco or other drug emblem clothing
- Televisions, computers, phones, cameras, musical instruments, radios, and video games
- \*Radios, walkmanø and CD players, I-pods, and cell phones are not allowed. Some clients will be allowed to use tape players for assignments at the discretion of the clinical team.
- Any work related to your profession such as reports, projects, papers

#### **NOTES:**

\*While electrical devices such as cell phones, portable CD players, I-pods etc. are not permitted during the treatment program, individuals may find them useful for their travel to and from Antigua. In such cases, the items will be stored during treatment and returned upon the clientø discharge.

\*\*Washer, dryer, and ironing facilities will be available for your use at no cost. Laundry detergent is provided. Towels and bed linens are supplied. The electrical current is 110 volts.

\*\*A \$25.00 administration fee will be charged to individuals who wish to have items purchased from off the premises, or special deliveries made while they are in treatment. Any such items must be approved by the Primary Counselor and will be at his or her discretion.



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## **FREQUENTLY ASKED QUESTIONS (FAQ)**

### **Telephone Hours:**

Individuals are allowed to make one call upon arrival. After the first five days of treatment, phone calls are limited to three 10-minute calls on Saturdays and Sundays during the following hours: Saturdays 3:00 p.m. to 9:00 p.m. and Sundays 9:00 a.m. to 9:00 p.m. Clients are not allowed to receive incoming calls, however, in the event of an emergency, a message will be relayed.

### **Mail:**

Clients can send and receive mail through post office delivery such as cards or letters, which will be opened in the presence of staff. Due to the difficulty we have clearing parcels that originate outside of Antigua; we will not accept parcels on behalf of any clients. Please do not send Federal Express packages without first speaking with the Admissions department. Clients do not have access to send or receive e-mail or faxes.

### **Valuables:**

For security reasons, client travel documents, airline tickets and large amounts of cash must be kept in the safe until discharge. Should clients require cash or credit cards for purchases during their stay, these can be obtained during designated times.

### **Medical Deposit:**

The \$500.00 Medical deposit cannot be applied to Gift-Shop bills or personal incidentals. This deposit will be returned after a client's discharge and after all accounts have been reconciled. Our accounts department will generally process medical refunds within two (2) weeks of discharge. Refunds will be processed in the same manner that they were received.

### **Bedrooms:**

Clients typically experience their detoxification period in a private room and are placed in a double occupancy room once medically stable. Each bedroom is equipped with its own bathroom, shower and verandah. Special room assignment requests will not be granted.

### **Temperature:**

Average temperatures in Antigua range from 24 to 30 degrees Celsius.

### **Facility:**

Residential buildings, group rooms and offices are air-conditioned.

### **Smoking:**

Smoking is permitted only in the designated area outside.



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**Ground Rules For Recovery**

*During your treatment stay at Crossroads, we want you to experience the best opportunity to begin the steps to your recovery. It is vital that the treatment environment at Crossroads reflect an atmosphere that reinforces, supports, and enhances this recovery process. The following is a list of rules to assist the Crossroads community in providing you with the most conducive environment for you to address your treatment and recovery goals. Compliance to these rules is necessary for all clients. Failure to comply, on the part of any client, could result in discharge from treatment.*

- 1. Alcohol and/or the use of other drugs are prohibited.**
  - 2. Violence towards other clients, visitors, and members of staff or property is prohibited. This includes, but is not limited to, physical or verbal abuse, threats (verbal or non-verbal), and verbal or physical gestures of intimidation. Also, racial or ethnic slurs, comments or gestures are not permitted. Individuals will be held financially responsible for any property damage incurred.**
  - 3. Attendance and participation in all scheduled activities is expected. Meals are considered scheduled activities and must be attended at all times. For you to get the most out of your treatment program, it is expected that you attend all activities and will be on time. Punctuality is a demonstration of respect for fellow clients and a commitment to your program of recovery. Excused absences will only be approved by medical and clinical staff.**
- \* Individuals that do not attend all activities as scheduled will be staffed and receive limits to various program privileges.***
- 4. Sexual or other exclusive relationships between clients are an unhealthy distraction to treatment and therefore are prohibited. Any form of physical contact that violates personal boundaries or presents as inappropriate is prohibited. Sexual, seductive, or romantic talk, jokes, or innuendoes are not permitted.**
  - 5. Confidentiality is essential to recovery. Disclosure of confidential information concerning another client to anyone outside of the Crossroads Treatment Team, during or after your treatment, is in direct violation of the treatment environment and could result in litigation from another client. Furthermore, information disclosed within the primary therapy group session is to remain confidential to that group.**
  - 6. The use of foul language is prohibited.**
  - 7. Gambling is not allowed in any form.**

8. **The use of tobacco products is allowed only at the designated smoking area. Clients are not permitted to light up, hold, or have unlit tobacco products in their mouths outside of the smoking area. We strongly encourage your attempts to stop the use of tobacco products while in treatment. CHEWING TOBACCO AND/OR CIGARS ARE PROHIBITED.**
9. **Only you and your roommate are allowed in your bedroom. Clients are not permitted to make special room assignments.**
10. **Every effort will be made to accommodate your nutritional requests. Individual requests will be evaluated by the clinical/medical teams.**
11. **Appropriate attire is expected at all times. All clients are expected to be fully clothed only for the exception of pool time activities and only at the pool area when the use of a swimsuit is required. SWIMSUITS FOR WOMEN MUST BE ONE PIECE. SWIMSUITS FOR MEN MUST BE BOXER TYPE. Walking outside of the pool area without a shirt or clothing over the bathing suit is not permitted. Shoes are to be worn at all times except while in the pool. Maintain proper dress to avoid exhibitionism or voyeurism. In the event a client demonstrates that he or she does not understand proper dress protocol, the client will be informed and educated on this matter by either staff or peers. No revealing, tight, or suggestive articles of clothing will be permitted during your treatment stay. Wearing undergarments is expected. Articles of clothing with logos or messages that are alcohol and drug-related or inappropriate in language will not be permitted.**
12. **Videos, novels, magazines, newspapers, or any literature other than approved recovery-based literature will not be permitted during your treatment stay.**
13. **Any “soft” or “hard” pornographic or sexually explicit literature or photographs will not be permitted.**
14. **Leaving the grounds is not permitted. The beachfront is off-limits except for walks during treatment activities when accompanied by staff.**
15. **Personal CD and Tape players are not allowed. Some clients, who need to use audio resources, will be given a tape player to listen to specific tapes as assigned.**
16. **Clients are not permitted to either send or receive faxes or emails, unless the material sent or received is to be used in the treatment process.**
17. **Clients will not be permitted to make any phone calls within the first five days of treatment. Upon arrival, clients will be permitted to make one phone call to notify a significant other of their arrival. After the first five days, phone calls will be limited to three calls on weekends. Phone calls are limited to ten minutes each call. (Please follow phone procedures as posted.)**
18. **Purchasing any personal items is limited to the gift shop. Any items required not available at the gift shop will be limited to emergency or items of necessity. The purchase of items outside of the gift shop will only be possible on Wednesdays. The**

request must be submitted to the counseling staff for approval no later than 12:00 p.m. on Tuesday. Each client is responsible for payment at the time of purchase order.

19. Computers, pagers, and cell phones are not permitted during your treatment stay.
20. Furniture in your room must remain in the same location as it was found.
21. There is only a certain supply of linens and blankets. Additional bed linens are not permitted unless approved by staff.
22. Clients are not permitted to loan money or personal belongings during their treatment stay. Clients are not permitted to purchase items or gifts for fellow clients.
23. Personal hygiene is each individual's responsibility. Clients are not permitted to assist in the personal care of others i.e.: hair, laundry, ironing, nail polishing etc.
24. Clients are not permitted to consume personal healthcare products, medications, or vitamins that are brought with them on admission. They will be kept in safe keeping until discharge. The attending physician at Crossroads must order any medications.
25. The use of the Fitness Room is strongly encouraged during Free Time in the Daily Schedule. For safety reasons, you must be accompanied by another client during use of the Fitness Room or while engaging in any other form of exercise on campus.
26. Visitation is encouraged during the 2:00 PM to 6:00 PM on Sundays. Visitation is by prior arrangement only. All visitors are required to sign the confidentiality statement and must check in with the nurse on duty on each visitation. Any items brought into the facility will be searched. Visitors are not permitted in client bedrooms. All visitors must be over 16 years of age.
27. It is every client's responsibility to report any physical illness or condition to the nurse on duty. Excused absences will only be approved by medical and/or clinical staff.
28. Each client may be subject to random drug screens. The clinical staff reserves the right to request a drug screen from any client during the course of his or her treatment stay.

\*\*\*\*\*

*I understand that the violation of any ground rules could result in discharge from Crossroads treatment services. Furthermore, I understand that depending on the nature of the violation and each client's individual response to treatment, a Concerned Staffing Meeting is not necessarily needed as part of the termination of treatment process.*

**In signing, I acknowledge that I read, understand and agree to follow the Crossroads Ground Rules during my treatment stay.**

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness \_\_\_\_\_ Date: \_\_\_\_\_



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## **Conditions of Admission**

The undersigned hereby applies to Crossroads Centre, Antigua as a client for rehabilitation which is intended for those individuals who are alcohol/drug dependent. This application is subject to the conditions and laws of the Country of Antigua/ Barbuda and hereinafter set forth.

General Conditions:

### **1. Consent to Treatment**

I hereby voluntarily consent to such medical care and treatment as is deemed necessary or helpful by Crossroads Centre, Antigua. I am aware that the practice of medicine and the treatment involved are not exact sciences and I acknowledge that no guarantees have been made to me as the result of treatment or examination at Crossroads Centre, Antigua.

### **2. Cooperation with Treatment**

The status of any person as a client may be terminated immediately and with reasonable notice by Crossroads Centre, Antigua whenever the medical/clinical staff determines the client/patient has failed, neglected or refused to cooperate with the staff in its efforts to treat such client/patient or for other good cause.

### **3. No Warranty**

Crossroads Centre, Antigua does not warrant or agree to effect a cure or rehabilitation of any client/patient, but merely to accord each patient such medical care and treatment as given other client/patients under similar circumstances.

### **4. Inspection as Necessary**

I hereby grant permission for Crossroads Centre, Antigua's personnel to inspect my personal belongings at any time and to remove from them any substance or objects that are considered dangerous or detrimental to the course of treatment.

### **5. Transfer to other Place of Treatment**

In the event, that it becomes the opinion of the medical/clinical staff of Crossroads Centre, Antigua that some other place of treatment will be more suitable for my course of treatment, I hereby consent to any transfer to such other place of treatment.

**6. All Clients/Patients Covered**

It is understood that the foregoing conditions of admission govern the treatment and care of all clients/patients admitted to Crossroads Centre, Antigua

**7. Transportation to other Facilities**

Crossroads Centre, Antigua may provide transportation services to the patient for medical, dental or other services not available at Crossroads Centre, Antigua. As a client/patient, I assume all responsibility for liability en route to/from the place providing the service to the full extent allowed by Laws of Antigua/Barbuda.

**8. Change in Conditions of Admission**

None of the Conditions herein may be modified, waived, changed or revised in any manner except in writing by the Board of Crossroads Centre, Antigua.

**9. Confidentiality**

I am obligated to maintain confidentiality and privacy regarding my fellow patients as it may relate to outside sources at all times.

**10. Responsibility**

Crossroads Centre, Antigua has no responsibility for any personal injury, (mental or physical) which may be received by participation in sports controlled exercises, other recreational activities, or from participation in any treatment or other activities of a client/patient and I agree to assume such responsibility to the full extent allowed by the laws of Antigua/Barbuda.

**11. Charges for Treatment**

Upon admission the client will be asked to, by way of a deposit, pay the total estimated charges for treatment. This deposit will be applied to the cost of treatment. I understand that payment is non-refundable and that the fees have been explained to me to my satisfaction.

**12. Financial Agreement**

The undersigned agrees that in consideration of the services to be rendered to the client/patient. He/she hereby individually obligates him/her self to pay the account in accordance with terms of Crossroads Centre, Antigua. Should the account be referred to a solicitor for collection, the undersigned shall pay reasonable solicitor's fees and collection expenses. All delinquent accounts bare interest at the legal rate.

I HEREBY CERTIFY THAT THIS FORM HAS BEEN FULLY EXPLAINED TO ME AND THAT I HAVE READ AND UNDERSTAND ITS CONTENTS.

-----  
Date

-----  
Client/patient

-----  
Witness



## **Welcome to Crossroads Centre's Family Program**

In providing a comprehensive care program for our clients, Crossroads Centre recognizes that healing from alcohol and other drug dependencies happens best with the involvement of families. Families and concerned others play a significant role in the recovery process.

Our Family Program offers family therapy, as well as education on alcohol and other drug addictions. Through lectures, group discussion and individualized attention, families learn about relationships, the addiction, and about changing unhealthy or painful communication patterns. All participants must be over the age of 18.

There will be times when the person using alcohol and other drugs refuses to participate in any treatment program. In this situation, families and other concerned persons are welcome to attend Crossroads Centre Family Programme. It is not unusual for the family to seek help first, and for the addicted person to follow.

Research and experience tell us that family involvement enhances recovery not only for the addicted person, but also for the entire family.

The Family Program is an integrated four-day program offered once each month. It includes lectures, group therapy, educational materials, family conferences and lunch-time meals. Participants are asked to make arrangements for their in-island transportation and accommodations. Both onsite and off-site accommodations are available and a partial list of options is included in this package.

To register for the family program please contact Sandra McCoy, Clinical Secretary at: [treatmentsecretary@crossroadsantigua.org](mailto:treatmentsecretary@crossroadsantigua.org) or telephone 268 562-0035; toll free USA and Canada: 1 888 452 0091; toll free United Kingdom: 0 800 783 9631



## COMPONENTS OF THE CROSSROADS CENTRE FAMILY PROGRAM

The following is a description of what is offered in the family program.

### A. Orientation to the program

Participants receive:

1. Explanation of the goals of the programme
2. Introduction to materials, including *One Day at A Time*.
3. Explanation of their rights and responsibilities as participants in this program.

### B. Education

A variety of topics are presented through the lecture and video format. These materials focus on alcohol and drug dependencies as a family illness, with the goal of moving families into recovery building on the Twelve Steps of Al-Anon.

### C. Group Therapy

All participants focus on identifying the effects of alcoholism and drug dependency.

### D. Assignments.

All participants are expected to complete the required readings, written assignments and participate in oral presentations and discussions.

### E. Aftercare recommendations.

Through individual consultations with the Family Program Coordinator, participants develop a continuing care plan to assist in maintaining healthy family relationships.



## LIST OF RECOMMENDED READING MATERIAL

The literature listed below is available at the Crossroads Centre gift shop and may be purchased during your attendance at the Family Week.

*Boundaries for Co-dependents*

*Co-Dependency: A second-hand life*

*Chemical Dependency: An Acceptable Disease*

*Co-dependent no more*

*Do's and Don'ts for family members*

*The Disease Concept*

*Family denial*

*The Language of Letting Go*

*Letting go of the need to control*

*Releasing Anger*

**Any Devotional Book:** *It is recommended that a devotional book be added to this list. There are several available personal preference will determine which one you choose.*



**CROSSROADS CENTRE, ANTIGUA  
FAMILY PROGRAM REGISTRATION FORM**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **RELATIONSHIP TO CLIENT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TEL: (h)** \_\_\_\_\_ **(c)** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**ADDITIONAL PARTICIPANTS:**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **RELATIONSHIP TO CLIENT** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **RELATIONSHIP TO CLIENT** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **RELATIONSHIP TO CLIENT** \_\_\_\_\_

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**PROBLEM SUBSTANCES:**

Alcohol \_\_\_\_\_ Cocaine \_\_\_\_\_ Opioids/Heroin \_\_\_\_\_  
Benzodiazepines (i.e. valium, xanax) \_\_\_\_\_ Methamphetamines \_\_\_\_\_  
Marijuana \_\_\_\_\_ Other (please list) \_\_\_\_\_

**Scheduled Dates for 2012:**

Circle the program you plan to attend. *(Dates may be subject to change).*

January 2-5, 2012	April 2-5, 2012	July 2-5, 2012	October 1-4, 2012
February 6-9, 2012	May 7-10, 2012	August 6-9, 2012	November 5-8, 2012
March 5-8, 2012	June 4-7, 2012	September 3-6, 2012	December 3-6, 2012

**Family program participation is included in the client's cost of residential treatment at Crossroads Centre.**

For those persons who do not have a family member or significant other currently in treatment at Crossroads Centre, the cost is US \$500. This can be paid by wire transfer, certified cheque or money order or by credit card. Full payment is due a minimum of five days prior to arrival. Questions and other financial arrangements can be discussed with Ms. Sandra McCoy, Clinical Secretary: [treatmentsecretary@crossroadsantigua.org](mailto:treatmentsecretary@crossroadsantigua.org)

Please fax this completed form to: 268 562-5529



## CROSSROADS CENTRE, ANTIGUA ON-SITE ACCOMMODATION

Crossroads Centre provides comfortable, affordable on site accommodations for guests participating in the family program. These rooms are separate from our residential client rooms, yet are accessible to the campus and all of its amenities. Each room is furnished with two single beds, private bath, small fridge, telephone, television, internet hook up and outside verandah. An outdoor social area with barbecue, swimming pool and deck area is also available exclusive to our guests. Accommodation includes all meals at Crossroads Centre dining hall; however guests are welcome, if they choose, to explore the many culinary delights off-campus that Antigua has to offer.

**Daily Rates are as follows** *(all prices are quoted in US currency):*

Single occupancy (1 person)                      \$125.00

Double occupancy (2 people)                      \$165.00

**NUMBER OF ROOMS REQUESTED**                      \_\_\_\_\_

**NUMBER OF PERSONS**    \_\_\_\_\_

**NAMES:**

\_\_\_\_\_  
\_\_\_\_\_

### **PAYMENT OPTIONS**

Payment may be made via any of the following credit cards: VISA, MasterCard, Discover and American Express. A one night deposit is necessary to secure accommodation at Crossroads Centre. This deposit is fully refundable in the event of cancellation a minimum of ten days prior to the start of the family program. Cancellations received less than ten days in advance are non-refundable.

Incidental charges such as telephone charges will be reconciled and billed to the original credit card. We ask all guests to bring with them their valid credit card used for purchase.

PLEASE COMPLETE THE ATTACHED CREDIT CARD AUTHORIZATION FORM AND SUBMIT WITH A COPY OF THIS FORM.

**Email:** [treatmentsecretary@crossroadsantigua.org](mailto:treatmentsecretary@crossroadsantigua.org); or fax to 268 562-5529



**Crossroads Centre, Antigua**  
**P.O. Box 3592, St. John's,**  
**Antigua, West Indies**  
**Telephone: (268) 562-0035 Fax: (268) 562-3278**

## **CREDIT CARD AUTHORIZATION FORM**

**-PLEASE PRINT LEGIBLY-**

I \_\_\_\_\_, (Please Print Name as It Appears on Card) hereby authorize Crossroads Centre, Antigua to charge the following credit card:

Visa   MasterCard   American Express   Discover (Check Appropriate Box)

**Card Number:** \_\_\_\_\_

**Card Expiration Date:** \_\_\_\_\_

**Card Security Code:** \_\_\_\_\_

**Name of Issuing Bank of Card:** \_\_\_\_\_

In the amount of \$ \_\_\_\_\_ U.S. dollars, towards accommodation at Crossroads Centre

Arrival date: \_\_\_\_\_                      Departure date: \_\_\_\_\_

I understand that a one night deposit is necessary to secure accommodation at Crossroads Centre. This deposit is fully refundable in the event of cancellation a minimum of ten days prior to the start of the family program. Cancellations received less than ten days in advance are non-refundable.

**Cardholder Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_                      **Tel:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are paying only the minimum 1 night deposit at this time, please indicate your method of payment for the balance of accommodation costs: \_\_\_\_\_



## **AGREEMENT FOR FAMILY PROGRAM PARTICIPANTS AT CROSSROADS CENTRE**

You can expect to be treated fairly and respectfully at Crossroads Centre and to have your privacy and dignity respected. You can expect to know the names of the staff members responsible for your care and that the staff at Crossroads Centre will make reasonable response to your request.

### **WE EXPECT YOU TO:**

- Refrain from bringing any alcohol and all other mood altering substances on the premises.
- Refrain from bringing cameras and tape recorders, as their use will not be permitted at Crossroads Centre. Cell phones must be turned off at all times.
- Wear an identification tag at all times, while on the premises of Crossroads Centre.
- Refrain from visiting/socializing with persons outside of the Family Program while at Crossroads Centre except during specifically approved times.
- Understand that all bags brought on the property at Crossroads Centre may be searched.
- Participants in the Family Program are not permitted in any of the residential client rooms and clients are not permitted in the family program accommodation units.
- Both residential clients and family members participating in Crossroads Centre services are not encouraged to remain on island following the client's discharge from the residential treatment program.
- All participants are expected to honor the confidentiality and privacy of the clients and Family Program participants. All information disclosed within sessions is confidential and may not be revealed to anyone without the signed written Release of Information form. All participants are expected to honor the confidentiality and privacy of the clients and Family Program participants. All information disclosed within sessions is confidential and may not be revealed to anyone without the signed Release of Information form.
- Agree to pay any charges or rates for the program if applicable.
- Understand that if the undersigned participant does not follow these expectations and co-operate with the programme and staff, he/she will be asked to leave the Family Program.

**I HEREBY CERTIFY THAT THIS FORM HAS BEEN FULLY EXPLAINED TO ME  
AND THAT I HAVE READ AND UNDERSTAND ITS CONTENTS.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print your Name

\_\_\_\_\_  
Signature



## ACCOMMODATIONS AND TRANSPORTATION INFORMATION

Here are a few suggestions on accommodation and transportation in Antigua

### **CROSSROADS CENTRE ANTIGUA**                      **Willoughby Bay**

On- campus accommodation includes: separate outdoor swimming pool and social area, all-inclusive of meals at Crossroads Centre.

Single occupancy US \$125.00

Double occupancy US \$165.00

Complete accommodation form and email to Ms. Sandra McCoy

[treatmentsecretary@crossroadsantigua.org](mailto:treatmentsecretary@crossroadsantigua.org) or fax to 1 268 562 5529

### **GRANDE PINEAPPLE ANTIGUA RESORT**    **Long Bay**

<http://www.grandpineapple.com/>

Garden View US \$225.00- \$341.00 (mention Crossroads for corporate rate)

Ocean View US \$242.00- \$374.00

This all-inclusive hotel is approximately 15 minutes from Crossroads.

Hotel is located alongside the Long Bay beach

Contact: 268 463 2006

### **TRADEWINDS HOTEL**                      **Dickenson Bay**

US \$175.00 - \$255.00 (mention Crossroads)

5 mins. from beach; 7-10 minutes from the airport; 35 minutes from Crossroads

Contact 268 462-1223

### **ST. JAMES CLUB**                              **Mamora Bay**

[www.eliteislandresorts.com](http://www.eliteislandresorts.com)

Price varies/all inclusive

20 mins from Crossroads

Contact: Miami office (may provide better rates) 954 481-8787 or Antigua 268 460-5000

### **THE INN AT ENGLISH HARBOUR**    English Harbour

US \$600.00 - \$1100.00

Website [www.theinn.ag](http://www.theinn.ag)

25 mins from Crossroads

Contact: 268 460-1014

\*Prices are subject to change

For more information, please visit the Antigua and Barbuda Department of Tourism

[www.interknowledge.com/antigua-barbuda](http://www.interknowledge.com/antigua-barbuda)

## TRANSPORTATION

Driving in Antigua is on the left hand side of the road. There are numerous car rentals in

Antigua including:    **Avis**    268-462-2840                      **Matthews Car Rental** 268-462-9523

**Hertz** 268 462-4114