Community of Concern

TOGETHER KEEPING YOUTH ALCOHOL & DRUG FREE

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Counselor's name **Email address (for correspondence)** **Asst. Principal/Dean of Students name** **Email** _____

Questions?

Mimi Fleury- President, Community of Concern
c/o Georgetown Preparatory School
10900 Rockville Pike, North Bethesda, MD 20852

Tel- 301-656-2481
Fax- 301-656-4331
mlfleury@aol.com