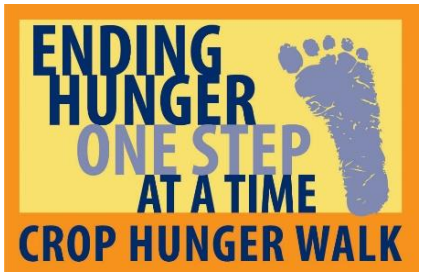

□□□ SIGN IN SHEET

STATEMENT OF CONSENT. I understand the risks involved in participating in the CROP Hunger Walk and willingly and voluntarily accept these risks. I attest that I am physically fit and prepared for this event. I grant permission for the organizers to use photographs / images and quotations from me in accounts and promotions of this event.

Name *(please print)*	**Congregation / Organization**	**Signature / Consent** *(parent or adult sign if under 18)*	**Email Address**