

Organic Herb Foraging Permission Slip

Foraging Location:

Location Name/Area:

Date of Foraging:

Forager's Name:

Contact Information:

Guardian Name (if under 18):

Guardian Contact:

Herbs to be Foraged:

Permission:

This slip grants permission to forage for organic herbs at the specified location and date, subject to applicable rules and guidelines.

Landowner/Authority Signature:

Date:

Forager's Signature:

Date: