

Interfaith Dialogue Consent and Waiver Form

Participant Information

Full Name

Email Address

Phone Number

Consent

☐ I consent to participate in the interfaith dialogue event.

☐ I consent to the recording and/or photography of the event.

Waiver and Release

I acknowledge and understand that participation in the interfaith dialogue event is voluntary. I hereby release and hold harmless the organizers from any and all liability, claims, or demands resulting from my participation.

☐ I have read and agree to the waiver and release terms.

Signature

Signature

Date