

Local Food Drive Participation Consent Form

Full Name

Address

Phone Number

Email Address

Emergency Contact Name & Number

Consent & Agreement

I acknowledge that I am volunteering to participate in the Local Food Drive. I understand the nature of this event and agree to participate at my own risk. I authorize event organizers to contact me if needed regarding event details or emergencies.

I consent to the handling of my provided information for the sole purpose of organizing and ensuring the safety of the Local Food Drive event.

Signature

Date