

# Project Scarf Sign-up Sheet



<http://www.projectscarf.org>

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: (optional) \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Best way to contact: (phone/e-mail): \_\_\_\_\_

Please place me on the Project Scarf e-mail list: (check one) Yes \_\_\_\_\_ No \_\_\_\_\_

How did you hear about Project Scarf? \_\_\_\_\_

Comments: (optional) \_\_\_\_\_  
\_\_\_\_\_

By filling out this form, I agree to allow Project Scarf to use my name and/or images of myself and my section of the scarf in Project Scarf publicity and promotional materials, both in print and on the Internet. I understand that this information will be used for Project Scarf only, and that my contact information will not be shared.

Signature: \_\_\_\_\_  
*(if you are under 18, a parent/guardian must sign on your behalf.)*

Print name: \_\_\_\_\_

**Betsy Rodman • Project Scarf • 50 Rosetown Rd • Tomkins Cove, NY 10986**