

Statement of Peace

١,		, testify to the following:
•	Print Name	. ,

- I will only pursue peaceful, law-abiding solutions to the violence of abortion when volunteering with the 40 Days for Life campaign
- I will show compassion and reflect Christ's love to all Planned Parenthood employees, volunteers, and customers
- I understand that breaking the law or acting in a violent or harmful manner immediately and completely disassociates me from the 40 Days for Life campaign
- I am in no way associated with Planned Parenthood, its affiliates or any abortion provider

While standing in the public right-of-way in front of Planned Parenthood location:

- I will not obstruct the driveways or sidewalk while standing in the public right of way
- I will not litter on the public right-of-way
- I will closely attend to any children I bring to the prayer vigil
- I will not threaten, physically contact, or verbally abuse Planned Parenthood employees, volunteers or customers
- I will not damage private property
- I will cooperate with local authorities
- I will not display graphic abortion picture
- If I am a minor, I will participate in 40 Days for Life only in the presence of or with the written permission of a parent or guardian.

permission	or a parent or guardian.				
	ive completed form to volunte				n will not be sold.)
Address:					
City:	State:		_ Zip:		
E-mail:	Phone:				
		□ Home	\square Work	□ Cell	
If the participant is a m complete the following		anied by a p		uardian,	a parent or guardian must
	or behalf of myself and my c				with this Statement of Peace onsible on his/her behalf to
I,Print Name	, give my permis	sion for	Print Mir	nor's Name	, to
participate in 40 Days	for Life by praying in the pub	lic right-of-	way in front	of Planr	ned Parenthood location.
Signature:		_Date:			
Address (If different fro	om above):				
E-mail:	Phone:				