

PARTICIPATION APPROVAL

I hereby acknowledge my willingness to participate in the Experience. I understand that the activity is designed to crisis. Participants will be confronted with a civic crisis ar resolve the matter by working in teams.	simulate a civic leadership
Furthermore, I acknowledge the fact that the scenario is completely fictional and is intended to be educational, not political, emphasizing civics.	
I understand that the Situation Room Experience is design collaboration, team building, communication and leaders real time.	
School/Group Name	
Concon Croup Hame	
Participant Name	
Participant Signature	
Parent/Guardian Signature (If Participant is a minor)	
Date	-