**Dear Stranger Participant Information Form**



Thank you for participating in Dear Stranger. Please complete and sign this form and mail it along with your letter to Humanities Nebraska, 215 Centennial Mall South Ste 330, Lincoln, NE 68508. Letters must be postmarked no later than **February 15, 2023** to be exchanged. Do not include your return address in the body of your letter. We will not share any of your information without your explicit permission.

Name

Email Address

Mailing Address

City Zip Code

By signing below, I grant Humanities Nebraska permission to share my letter with another participant in Dear Stranger and acknowledge that Humanities Nebraska accepts no responsibility for the content of correspondence exchanged through Dear Stranger.

Signature Date

Dear Stranger participants will be added to Humanities Nebraska’s weekly e-blast mailing list.

* Please check this box if you **do not** want to receive our e-blast.

We post images and excerpts from some Dear Stranger letters to our website and publications.

* Please check this box if you **do not** want us to post content from your letter.

**If you are eighteen years old or younger, please have your parent or guardian complete the following:**

Parent or Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age of Child \_\_\_\_

I grant permission for my child (named above) to participate in Dear Stranger.

![C:\Users\Barbara\AppData\Local\Microsoft\Windows\INetCache\IE\YOAISMCZ\768px-Ic_check_box_outline_blank_48px.svg[1].png]() My child may receive a letter from an adult.

![C:\Users\Barbara\AppData\Local\Microsoft\Windows\INetCache\IE\YOAISMCZ\768px-Ic_check_box_outline_blank_48px.svg[1].png]() I request that my child receive a letter from a child

Parent or Guardian Signature