



INSTITUTE ATTENDANCE AND CONSENT FORM

Multiple District/Single District/District # _____ Type of Institute _____

Date(s) of Institute _____ Location of Institute _____

Number of Faculty _____ Number of Participants _____

Reporting: The information shared will be recorded to ensure individual Leos and Lions are given credit for attending training events. If you have any questions on how this information will be used, contact Leadership Development (institutes@lionsclubs.org).

***Photo Consent:** By signing this form, you authorize that any photographs/videos taken of you at this institute can be used by Lions Clubs International for the purpose of printed, digital, video, or other mediums for the purposes of promotion and publicity for Lions Clubs International. Those images shall be the property of LIONS CLUBS INTERNATIONAL for all use.

If the list is missing membership numbers and/or signatures, the form will not be accepted.

List of Faculty: maximum 2-3 faculty per classroom

	Name (please print)	Club Number	Member Number	District	Photo/Video Consent* (signature)	Day 1 (initial)	Day 2 (initial)	Day 3 (initial)
1								
2								
3								
4								
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7								
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10								
11								
12								

INSTITUTE ATTENDANCE AND CONSENT FORM

List of participants: maximum 25 / minimum 15 participants per classroom. Use additional sheets as needed.

	Name	Club Number	Member Number	District	Photo/Video Consent* (signature)	Day 1 (initial)	Day 2 (initial)	Day 3 (initial)
1								
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INSTITUTE ATTENDANCE AND CONSENT FORM

List of participants: maximum 25 / minimum 15 participants per classroom. Use additional sheets as needed.

	Name	Club Number	Member Number	District	Photo/Video Consent* (signature)	Day 1 (initial)	Day 2 (initial)	Day 3 (initial)
26								
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