

**Participant Release Form**

**LISTENING SESSION CONSENT**

As part of my participation in the ***Listening Session with Fathers and Families Living in Rural Pennsylvania, and the Outskirts of Urban and Suburban Communities***, I understand participation is **voluntary**, and that I may cease participation at any time. I acknowledge that my participation is private. Reports about the listening session will protect participant’s privacy by excluding names and personally identifiable information. I understand that there will be an audio recording to create a transcript and analyze the information provided by participants.

I agree to participate in the listening session: Yes\_\_\_ No\_\_\_

**Print Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_