



Acceptance of Financial Responsibility

I, _____, hereby accept full financial responsibility for all costs involving in my participation in the "HOPE RWANDA: 100 Days of Hope Project".

I am participating in the above-mentioned project on a voluntary basis, and have willingly agreed to travel to Rwanda at my own risk and expense. I will therefore by no means place any financial burden or expectations on Hope Incorporated or any of its associated Directors, members, employees, team leaders or partners.

I consider this agreement to be binding on my part, and have been made fully aware of the costs involved in my participating in this project and its activities.

Signed: _____

Print Name: _____

Witness: _____

Print Name: _____

Date: _____