



Dear Stranger Participant Form

Thank you for participating in Dear Stranger. Please complete and sign this release form and mail it along with your letter to the following address:

Florida Humanities
ATTN: Mara Utterback
599 2nd St. S
Saint Petersburg, FL 33701

Letters must be postmarked no later than **December 31st, 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: _____ State: _____

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

Signature: _____ Date: _____

We will post images and excerpts from some Dear Stranger letters to our website, publications, and social media.

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

If you are 18 years 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.

My child may receive a letter from an adult.

I request that my child receive a letter from a child.