

Ohio SNAP-Ed Adult Participant Sign-In Sheet – FY 2020

Program Title _____ Facilitator's Name _____

Date _____ Start Time _____ County _____ Delivery Site _____

Please sign your name below and provide an email address (optional). This information will be kept confidential.

NAME	EMAIL (provide if you want to receive information about upcoming programs or other resources)
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CFAES provides research and related educational programs to clientele on a nondiscriminatory basis. For more information, visit cfaesdiversity.osu.edu.
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THE OHIO STATE UNIVERSITY

FAMILY AND CONSUMER SCIENCES
COLLEGE OF EDUCATION AND HUMAN ECOLOGY
COLLEGE OF FOOD, AGRICULTURAL, AND
ENVIRONMENTAL SCIENCES

NAME	EMAIL (provide if you want to receive information about upcoming programs or other resources)
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