



## LAWN SIGN RELEASE FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Location/ Placement of sign: \_\_\_\_\_

I am the property owner or authorized representative.  
I give authorization for the Committee for Allan Fung to place  
a lawn sign on my property:    \_\_\_ YES        \_\_\_ NO

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**If you are a renter- you MUST obtain your landlord /  
property manager's permission to place a sign on their  
property.**

**Fax to : 401.632.4961**