



小水滴新生
Dew Drops Little Flower

Visitor Information Form

We love visitors and volunteers! We are doing something good for children and the more people who know what we are doing then the more people will help us! And we need lots of help, especially financial help.

In order to help children we first have to protect their health and their right to privacy. In addition, all of our work is in partnership with government run social welfare institutions and as such we take very seriously our responsibilities to our friends and cooperators in the government. For these reasons we have a visitor and volunteer system.

Please read carefully (tick "v" each box) and then sign below:

1. I understand that I am a visitor; I have read and understand all of the information pertaining to visitors on this page. ()
2. I promise to stay in the presence of Dew Drops Little Flower staff at all times. ()
3. I promise to get permission from Dew Drops Little Flower staff prior to interacting with any child. I understand that the children have special care requirements, and that I need to sanitize my hands prior to holding them. ()
4. I promise to not give anything directly to children, including sweets and snacks. ()
5. I promise that I have no illness and to the best of my knowledge have not been exposed to any communicable diseases. ()
6. I promise that I will not reveal the full name or origin of any child to anyone. ()
7. I promise not to take any photos, videos or other recorded images. ()
8. I promise not to discuss, criticize or compare the Chinese government in relation with Dew Drops Little Flower in any public statement (Newspaper, Weibo, Facebook, YouTube, blog, forums etc.). We want to help children and are NOT politically active. ()
9. I promise to do my best to assist Little Flower and I hereby indemnify Little Flower staff of any and all liability. ()

Print name: _____

Signature: _____ Date: _____



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Visitor details:

| | | | |
|---|---------|----------------------------------|--|
| Name | | Date of visit | |
| Group Name (if applicable) | | Number of people in group | |
| Contact information | Phone: | | |
| | Email: | | |
| | WeChat: | | |
| How did you hear about us? | | | |
| Social Media <input type="checkbox"/> | | | |
| Friend <input type="checkbox"/> | | | |
| Website <input type="checkbox"/> | | | |
| Other <input type="checkbox"/> | | | |
| How are you willing to help OCF Dew Drops? | | | |
| | | | |
| Donation Details | | | |
| | | | |

Thank you for your support!