"Get It Together - Buckle Up"

2018-2019 Buckle Up Pledge

Signature Form

School Name: _____

I pledge to wear my safety belt every time I am in a vehicle and I pledge that I will encourage my friends and family to buckle up as well.

NAME	Student/Faculty S or F	Date	NAME	Student/Faculty S or F	Date

Instructions: Total Student Signatures: _____

1. Each student may only **sign the petition one time**. Only Student signatures should be counted in the total. No repeats allowed.
2. Each person who signs the petition receives a Buckle-Up Pledge card to keep as a reminder.
3. Tabulate and transfer the number of student signatures to the report. For the Midway Activity Report, please note the number of students signing the pledge between October 23-December 14, 2018. For the Final Activity Report, note the number of students signing the pledge between December 15, 2018-February 15, 2019.
4. **Please turn in the actual copies of the signed pledge signature forms .**

****Please make enough copies of this form to ensure a signature line for every student/faculty member. ****