## **General Rules and Regulations Verification Form**

Group \_\_\_\_\_

By my signature, I acknowledge that I have read, understand, and agree to the Rules and Regulations as defined in the outpatient welcome 2019 Rules Handbook that I received.

As a Group Officer, I have distributed and reviewed the 2019 Rules with my team in preparation for the 2019 International Slet.

Physical Director Signature	Date
Assistant Physical Director Signature	Date
Physical Directress Signature	Date
Assistant Physical Directress Signature	Date