



# STATEMENT OF PEACE

For participation in Auckland 40 Days for Life vigils and other prayer vigils with Family Life International NZ

I, \_\_\_\_\_, testify to the following:  
Print Name

- I will pursue only peaceful, prayerful and lawful solutions to the violence of abortion by supporting life from natural conception to natural death.
- I will show compassion and reflect Christ’s love to all.
- I will not intentionally harm or commit crimes or violence.
- I am in no way, directly or indirectly, associated with any abortion provider or promoter.

### While participating in 40 Days for Life activity or other prayer vigils facilitated by FLI:

- I will not obstruct or block driveways, footpaths, roadways or any lawful passage.
- I will not litter, deface, damage or trespass on another’s property.
- I will closely attend to any children I bring to the prayer vigil.
- I will not threaten, curse, yell at or verbally abuse anyone.
- I will neither commit any act of violence, threaten or touch any person, nor display or discuss weapons.
- I will be polite and cooperative with the Police and valid civil authority.
- If asked to leave by a valid authority, I will comply and contact the vigil leader.

### I will strive to maintain the safety of myself and others by:

- Trying to have at least two vigil participants on site at a time and never being alone after dark.
- Holding vigil in a safe, public and lawful location.
- Immediately calling and cooperating with Police and recording any incident if I feel unsafe or if any act of violence or damage is made or threatened.
- Leaving and calling the Police if I feel threatened or endangered.

If I am a minor, I will participate in 40 Days for Life only in the presence of, or with the written permission of a parent or guardian. (See form on reverse side).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ City: \_\_\_\_\_ Post Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home  Work  Cell



FAMILY LIFE  
INTERNATIONAL NZ

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**If the participant is a minor who will not be accompanied by a parent or guardian,  
a parent or guardian must complete the following section:**

### **PARENTAL/GUARDIAN CONSENT**

I, the minor's parent and/or legal guardian, have read and understand and agree with this Statement of Peace and agree to all terms on behalf of myself and my child/charge. I agree to be responsible on his/her behalf to the fullest extent of the law.

I, \_\_\_\_\_, give my permission for \_\_\_\_\_,  
Print Name Print Minor's Name

to participate in 40 Days for Life and/or other vigils organised by Family Life International NZ by praying on the footpath opposite AMAC in Dominion Road.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: (if different from above): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home  Work  Cell

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