***Collaborative Process Consent Form***

I agree to participate in the design/creative process conducted by Caitlin Sikora.

I understand that participation in this usability study is voluntary and I agree to immediately raise any concerns or areas of discomfort during the session with the study administrator.

\_\_\_\_\_\_\_\_\_I give permission for my words and ideas to be included in written papers and online published materials.

\_\_\_\_\_\_\_\_\_I give permission for photos of me to be included in papers and online published materials.

\_\_\_\_\_\_\_\_\_I give permission for videos of me to be included in papers and online published materials.

\_\_\_\_\_\_\_\_\_I give permission for audio recordings of me to be included in papers and online published materials.

Please sign below to indicate that you have read and you understand the information on this form and that any questions you might have about the session have been answered.

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

Please print your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please sign your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you!

I appreciate your participation.