

Video Photo Release

I hereby indicate, as specified below, my consent to use any photos, videotape, or audiotape material taken of myself during this research project. I understand that I may withdraw permission for photographic, video or audio material to be used in this research project at any time. PLEASE CHECK TWO BOXES AND SIGN BELOW

I agree to have my audio or visual material available for the research project and educational use in classroom and laboratory settings.

I do not agree to make audio or visual material available for the research project and educational use in classroom and laboratory settings.

I agree to have my audio or visual material available on the internet as part of a webpage.

Do not make my audio or visual material available on the internet as part of a webpage.

Participant's Signature

Date

Witness Signature

Date