

Your participation in this research is voluntary. Your refusal to participate will not result in any penalty to you or any loss of benefits to which you may otherwise be entitled. You may decide to stop participating in the research at any time without penalty or loss of other benefits. The project investigators retain the right to cancel or postpone the experimental procedures at any time they see fit.

Initial each statement that you agree with

- I give permission for my name to be used in the videos. ✓
- I give permission to release other personal information that may enhance the videos. Examples: birthplace, age, etc. ✓
- I give permission for my face to be shown in the videos. ✓
- I give permission for this video to be published on the CERES visitor app. ✓
- I give permission for this video to be published on the CERES Youtube Channel ✓

By signing below, you acknowledge that you have been informed about and consent to be a participant in the study described above. Make sure that your questions are answered to your satisfaction before signing. You are entitled to retain a copy of this consent agreement.



Ravella

Study Participant Signature

30 / 10 / 18

Date

Ravella

Study Participant Name (Please print)



Signature of Person who explained this study

30-10-18

Date