

CONSENT FORM

Full name of form administrator _____

Date and signature _____

Contact information _____

Full name of the participant _____

Relationship to the participant Participant / owner / CEO / legal proxy / other: _____

Reason for proxy consent* _____

*if applicable

I, _____, confirm that I have been informed of the
(full name)

topic and aims of the survey, the form and extent of information that will be published. I am aware that no financial remuneration will be provided for participation in the survey and / or signing of this consent form. I understand that that I can revoke my consent at any time before publication, but once the results of the survey are published, retraction of consent will not be possible. I am aware that the administrator of the form and all involved with the publication of survey results will make their best effort to ensure the confidentiality of information and anonymity of participants. I understand that despite their best efforts and practices, identification is not inexorably precluded.

I hereby give my consent for the use of information provided by the above-indicated participant for non-commercial purposes.

Signature _____

Date _____