

Contact details

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VIDEO RELEASE CONSENT FORM

I hereby consent to the video recordings of myself and the use of these recordings singularly or in conjunction with other recordings for research purposes. I understand that the term "recording" as used herein encompasses both depth videos and standard video footage. I understand that the footage records my face thus can be used to identify me.

I further consent to the University of Bristol sharing this footage for public research use and with other research groups as they deem fit. Further, I understand that others, with or without the consent of the University of Bristol may use this footage in their own research.

Print Name: _____

Signature: _____

Date: _____