



University of
BRISTOL

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Contact Details

Vahid Soleimani
Computer Science Department
University of Bristol, BS8 1UB, UK

vahid.soleimani@bristol.ac.uk

VIDEO RELEASE CONSENT FORM

I hereby consent to the depth 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 depth videos.

I understand that after the study, anonymized footage may be made available as "open data". This means the footage will be publicly available and may be used for purposes not related to this study.

I hereby release the University of Bristol, and any of its associated or affiliated companies, their directors, officers, agents, employees and customers, from all claims of every kind on account of such use.

Print Name: _____

Signature: _____

Date: _____