## Recording consent form

Thank you for participating in our usability research.

your comments bers who are unable to be here today to observe your session and benefit from We will be recording your session to allow [ORGANIZATION NAME] staff mem-

Please read the statement below and sign where indicated.

I understand that my usability test session will be recorded.

of improving the designs being tested. I grant [ORGANIZATION NAME] permission to use this recording for the purpose

Signature: Day MUM

Print your name: GAM

Date: 10/25/2022