Monitoring Age-related Macular Degeneration Progression In Optical Coherence Tomography - MICCAI Challenge 2024 (MARIO) Data Challenge Participation Form

Participant Information

Name: _____

Affiliation (if applicable): _____

Email: _____

Team Name (if applicable): _____

Team Members (Name, Affiliation, Email): _____

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Challenge Participation

- I/We, the undersigned, confirm our intent to participate in the MARIO challenge according to the official rules and guidelines set forth by the challenge organizers.,

- I/We understand that the challenge data is anonymized to protect patient confidentiality.,

- I/We agree to use the challenge data only for the purposes of this challenge and in accordance with the provided guidelines.,

- I/we agree to participate in the following task and to provide a correct solution and open source the code in case I/We are in the TOP 5 teams :
  - ☐ Task 1
  - ☐ Task 2
  - ☐ Both

- I/We understand that the data cannot be shared with any third party.
  Publications and Authorship, The participating teams may publish their own results (in journal) separately after a 6 month embargo or once the challenge paper is published on Arxiv (whichever occurs first).

- I/We grant the challenge organizers permission to use our anonymized results in publications or presentations related to the challenge. (Please select one),

☐ Yes
☐ No

I/We disclose any potential conflicts of interest related to the challenge data or topic (optional): _____

Signatures

Participant : _____ (Printed Name)

Date: _____

Team Leader (if applicable): _____ (Printed Name)

Date: _____