

Informed Consent Form GZ-922

Please read and understand this form in its entirety.

I am asking for your voluntary participation in this study. Please read the following information about the project. If you would like to participate, sign below in the appropriate box.

Title: Basketball Event Tracking Interface

Purpose: To design a basketball event tracking interface for quickly recording events that occur during basketball games.

Tasks: Use our software to record all the events that occur for 30 second clips of past basketball games. There will be three trials and several questionnaires.

Time: Participation in this study takes 20 minutes at most.

Risks: Carpal Tunnel Syndrome.

Benefits: No compensation will be provided for participation in this study.

Confidentiality: All information logged that pertains to you will be kept strictly confidential. We will not share this information with any third parties without your consent. Any data collected will be used for research purposes only.

Please be aware that participation is completely voluntary. If you decide not to participate will not be any negative consequences. Please be aware that if you decide to participate, you may stop participating at any time. In addition, you may decide to not answer a specific question.

I, _____ (*print full name*), have read the information above and give my consent to participate.

Signature:

Date:
