

SIGNATURE

Media Recording Waiver and Release - Adult Informed Consent

TO: THE GOVERNORS OF THE UNIVERSITY OF CALGARY RELEASE AND CONSENT AGREEMENT NAME Archana Senthil ADDRESS 10 Nolancrest Rise NW, Calgary, AB T3R0T2 COURSE CODE/ACTIVITY & TITLE DATA 693/5 Final Presentations, Internship/Research Capstones COURSE/ACTIVITY DATE August 31, 2025 The University of Calgary (the "University") has asked individuals participating in the course or activity outlined above to appear in photographs, video, audio recordings, or other forms of digital media (the "Materials"). I have agreed to participate. In consideration of the value of participating in the University's course, activity or publicity program, and the University's promotion thereof, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I agree to the following: 1. I consent to the use of my name, image, likeness, appearance, voice and other personal characteristics in the Materials and authorize the University to use, reproduce or distribute the Materials for instructional, marketing, advertising, trade, promotional or other business or educational purposes and for use in any University publications, broadcasts, social media posts or other forms of printed or electronic media. 2. I irrevocably transfer and assign to the University my rights, title, interest and copyright, if any, in the Materials, and hereby waive all moral, personality, publicity or privacy rights therein. I acknowledge and agree that I have no right to review or approve the Materials before they are used, reproduced, or distributed and acknowledge and agree that the University has no obligation to use, reproduce or distribute the Materials. 3. I irrevocably release the University, and its successors or assigns, from all liability in connection with the Materials and the use, reproduction or distribution thereof. This release and consent agreement is governed by the laws of the Province of Alberta. Any claim or cause of action arising under this agreement shall be brought in the provincial courts of Alberta. 4. I understand that having granted the consent herein, I may withdraw that consent at any time by notifying the University in writing, provided that the University shall continue to have my consent to use, reproduce or distribute any Materials which have already been produced or that the University has committed to producing prior to the withdrawal. I certify that I have read and fully understand this release and consent agreement and that I am 18 years of age or older. Dated at the City of Calgary, in the Province of Alberta, this 11 day of August WITNESSED BY UNIVERSITY OF CALGARY SIGNED BY ARCHANA SENTHIL GANESH BABU SAKTHIVEL PRINT NAME PRINT NAME Archana Senthil Ganesh Babu Sakthivel

The information in this release and consent agreement is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act (Alberta) and is required for the operation of the University's publicity program. For related privacy questions, please contact the University Access and Privacy Office at 403-210-8405 or at accessandprivacy@ucalgary.ca.

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