**RECORDING CONSENT FORM**

Thank you for participating in our usability research.

We will be recording your session to allow Lily Brown, Christine Bolognino, and Aidan Goldman to observe your session and benefit from your comments.

Please read the statement below and sign where indicated.

I understand that my usability test session will be recorded.

I grant Lily Brown, Christine Bolognino, and Aidan Goldman the permission to use this recording for internal use only, for the purpose of improving the designs being tested.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_