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**Participation Agreement**

*(A signed copy is handed out to the participant)*

Date and test location: ……………………………………………………………………………………..

Participant (full name): ……………………………………………………………………………………..

Developer (full name): ……………………………………………………………………………………..

Responsible professorship: *Name of responsible professorship*

Contact: *Address, phone, email of developer*

**What is investigated and how?**

*Describe the objective of the tests and what the participant is supposed to do in an easy language.*

**What data is collected from me and how is it used?**

*Describe what physiological, demographic, or other data will be collected and explain their purpose. Indicate who analyses the data and in what form it will be stored (ideally anonymous).*

**What are my rights during participation?**

*Possible text:* Your participation in this study is voluntary. You may withdraw your participation at any time without specifying reasons and without any disadvantages.

**With this agreement I, the participant, confirm that:**

* I have been informed about the aims, procedure and possible risks of the planned prototype test or technical evaluation (“test”).
* *If applicable:* I acknowledge that the prototype is not certified by Swissmedics.
* I voluntarily agree to participate in the test and I know that I can stop participating at any time without giving reasons.
* I have been informed that participation in the test happens at my own risk.
* I consent that my data be used as described above.

**I, the participant, grant permission to ETH Zurich to use audiovisual recordings made during the test for the following purpose (mark one only):**

[ ]  For internal analysis and documentation

[ ]  For internal analysis and documentation + external communication after anonymization

[ ]  For internal analysis and documentation + external communication as recorded

This agreement shall under no circumstances be used to consent participants to undertakings that are subject to approval by a Kantonale Ethikkomission or the ETH Zurich Ethics Commission.

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Date, signature PARTICIPANT Date, signature DEVELOPER