

# **ROBOFEST Informed Consent, Release and Media Authorization Form - REQUIRED FOR ALL PARTICIPANTS: Students, Teachers, Coaches, & Volunteers**

For the purposes of this document, "Robofest" shall be Lawrence Technological University (LTU), and its officers, directors, employees, assigns, and agents, including any third party designated and approved by Robofest at any time. As used below, "Participant" shall mean any individual, student, mentor, coach, teacher or volunteer involved in a Robofest event. "Partners" shall mean individuals or entities that manage, organize, sponsor, and/or host Robofest events and Tournaments. In acceptance of my participation in any Robofest & related programs, meetings or events (collectively, the "Event"), I agree to the following:

I, the Participant, hereby grant to Robofest and its Partners the right to photograph and/or videotape me during my participation in an Event. I further grant to Robofest and Partners, throughout the world, the right to use these photographs and videotapes of my likeness, voice and sounds during my participation, and to license the right to reuse such photographs and videotapes of my participation, and my name, likeness and biography, in any and all media for any purpose, including advertising and other promotions of Robofest, and its Partners, without compensation to me. Each such photograph and videotape shall be a work for hire and Robofest shall be deemed the owner of any copyright and/or trademark rights therein. LTU may use my information for their program promotions.

The undersigned being fully cognizant of the risks in participating in an Event, hereby assumes the risks of bodily injury and property damage, inherent in such participation. I hereby waive any claims or causes of action which I may now or hereafter have against Robofest or its Partners, arising out of my participation, and I will indemnify and hold harmless Robofest, and its Partners against any and all claims resulting from such participation.

## **Informed Consent for Participation in Assessing the Impact of Autonomous Robotics Competitions in Math and Science Education – This applies to ONLY STUDENT Participants**

I, the **Student Participant**, agree to participate in the Assessing the Impact of Autonomous Robotics Competitions in Math and Science Education conducted by the Department of Math and Computer Science, LTU, 21000 W. Ten Mile Rd, Southfield, MI, 48075, USA. I understand this research is a study to quantify students' improvements in Science, Technology, Engineering, and Mathematics skills through robotics competitions that require computer programming.

As part of my participation in this study, I understand I will be taking two survey-style online assessments with basic math and science questions and the data will be analyzed only by LTU researchers. My part of the study involves approximately 15 minutes for an assessment. I understand that I may not receive any direct benefit from my participation in this study, and that my participation is completely voluntary. I also understand that I may withdraw at any time from this study. I understand that my name or identity will not be used in reports or presentations of the findings of this research, i.e. the assessment results are completely anonymous.

I have read and understand this information and agree to participate in this study. I know this form can be obtained from the Robofest home page at [www.robofest.net](http://www.robofest.net).

*For questions or concerns about the research, please contact Dr. CJ Chung, Associate Professor, Department of Math and Computer Science, 248-204-3568. For concerns about your treatment as a research participant, please contact the Institutional Review Board (IRB) at LTU, [IRB@ltu.edu](mailto:IRB@ltu.edu).*

_____ <b>Signature of Participant</b> (Not necessary if under 18)	_____ <b>Printed Name of Participant</b> (Required)	_____ <b>Date</b>	
_____ <b>Signature of Parent or Legal Guardian</b> (If Participant is a Minor under 18)	_____ <b>Printed Name of Parent</b> or Legal Guardian	_____ <b>Date</b>	
<b>Address of Participant:</b> _____		<b>Age (If minor):</b> _____	
<b>City:</b> _____	<b>State:</b> _____	<b>Country:</b> _____	<b>Zip:</b> _____
<b>Phone: Home</b> _____	<b>Daytime</b> _____		
<b>Team ID:</b> _____	<b>Team Organization Name:</b> _____		

***This signed form must be submitted by Coach, preferably, for all participants when checking in at all Robofest Sites.***