Recording consent form

Thank you for participating in our usability research.
We will be recording your session to allow [ORGANIZATION NAME] staff members who are unable to be here today 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 [ORGANIZATION NAME] permission to use this recording for internal use only, for the purpose of improving the designs being tested.

Signature: _______________________________
Print your name: __________________________
Date: __________________