

Information and Consent Form for the Battle River Watershed Alliance's Traversing Terrain and Experience Atlas

Participant Information

Full name:

Age:

Email address:

Phone number:

Mailing address:

Consent

I understand that by filling out this consent form, I am indicating my consent to have my photographs, stories, artwork, and/or any other submitted materials (hereafter 'submissions') and other information I provide during the project (written and/or oral communications) used in the creation of the Battle River Watershed Alliance's Traversing Terrain and Experience atlas (hereafter 'the Atlas'). This may also include atlas presentations, displays/exhibits, web postings and other media releases of the Battle River Watershed Alliance (BRWA).

I understand that I may choose to withdraw my submission(s) at any time up to November 30, 2014.

I, _____, (name) have read and understood the terms of consent. I agree to participate in the Atlas project, an initiative of the BRWA.

Please check this box if you would prefer to remain anonymous in the atlas and associated materials. (The BRWA will use an agreed upon pseudonym instead)

Questions about the project? Phone the BRWA at 780-672-0276 or email otis@battleriverwatershed.ca

Participant name (please print clearly)

Signature of participant

Date