

JoVE Participant Release Form

All participants in a JoVE filming who are not listed authors on the project manuscript, such as lab/graduate assistants or patients must fill out this form.

Participant Name: Timothy Beck

Project Title: Preparing anhydrous reagents and equipment

I hereby consent for value received and without further consideration or compensation to the use (full or in part) of all videotapes taken of me and/or recordings made of my voice and/or written extraction, in whole or in part, of such recordings or musical performance for the purposes of illustration, broadcast, or distribution in any manner.

at The College of William & Mary

(Recording Location)

on Jan 31, 2016

(Date)

By: Aaron Kolski-Andreaco

(Producer)

For: The Journal of Visualized Experiments (JoVE)

(Producing Organization)

Participant Signature 

Address 122 Indian Summer Ln City Williamsburg

State VA Zip code 23188

Date: 12/31/16

If the subject is a minor under the laws of the state where modeling, acting, or performing is done:

Legal guardian \_\_\_\_\_

(Signature)

\_\_\_\_\_

(Printed name)

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

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Participant Name: Lucas Arney  
Project Title: Preparing anhydrous reagents and equipment

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at College of William and Mary on 1/31/16  
(Recording Location) (Date)

By: Aaron Kolski-Andreaco  
(Producer)

For: The Journal of Visualized Experiments (JoVE)  
(Producing Organization)

Participant Signature Lucas Arney  
Address 183 Stage Rd City Buchanan  
State Virginia Zip code 24006  
Date: 1/31/16

If the subject is a minor under the laws of the state where modeling, acting, or performing is done:

Legal guardian \_\_\_\_\_  
(Signature) (Printed name)

Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

JoVE Participant Release Form

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Participant Name: Matt Smith  
Project Title: Carrying out reactions below room temperature

I hereby consent for value received and without further consideration or compensation to the use (full or in part) of all videotapes taken of me and/or recordings made of my voice and/or written extraction, in whole or in part, of such recordings or musical performance for the purposes of illustration, broadcast, or distribution in any manner.

at W&M on 2/7/16  
(Recording Location) (Date)

By: Aaron Kolski-Andreaco  
(Producer)

For: The Journal of Visualized Experiments (JoVE)  
(Producing Organization)

Participant Signature [Signature]  
Address 3721 Capt. Wynne Dr. City Williamsburg  
State VA Zip code 23185  
Date: 2/7/16

If the subject is a minor under the laws of the state where modeling, acting, or performing is done:

Legal guardian \_\_\_\_\_  
(Signature) (Printed name)

Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_