Talent Release Form

(sign/print name)

Date: ___/___

Address _____ City ____

State _____ Zip Code _____

Talent Name: Geir Ogrim. Project Title: Event Related Potentials (ERPs) and other EEG Based Methods for Extracting Biomarkers of Brain Dysfunction: Examples from Pediatric Attention Deficit/Hyperactivity Disorder (ADHD) 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 Åsebråten Barne-og ungdomspsykiatriske klinikk on January 10th 2020 (Recording Location) (Date) by Kristoffer Hamilton for JoVE (Journal of Visualized Experiments) (Producer) (Producing Organization) Talent's signature Address: Ilaveien 127 City: Fredrikstad Country: NORWAY Zip code 1605 Date: 06/01/2020 If the subject is a minor under the laws of the state where modeling, acting, or performing is done: Legal guardian _____

Talent Release Form

Date: ___/___/__

Talent Name: Maria Danielsen

Project Title: Event Related Potentials (ERPs) and other EEG Based Methods for Extracting Biomarkers of Brain Dysfunction: Examples from Pediatric Attention Deficit/Hyperactivity Disorder (ADHD)

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.

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