I agree to participate in Web Site Usability Testing conducted by the [Agency/Organization].

I understand that participation in this usability study is voluntary and I agree to immediately raise any concerns or areas of discomfort during the session.

Please sign below to indicate that you have read and you understand the information on this form and that any questions you might have about the session have been answered.

## Date: \_\_\_\_\_\_\_\_\_

## Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Thank you!