

## Participant Consent

- a) I confirm that I was fully informed about the environmental conditions prevailing during the study visit to the Exclusion Zone, the scope and proceeding of the visit.
- b) I confirm that I have read and understand this information and I have had the opportunity to ask questions about the study visit.
- c) I don't have any physical and psychical problems, that could get worse while on participating in the visit.
- d) I know with whom I can to contact at any time for answers to pertinent questions about the visit to the Exclusion Zone and whom to contact in the event of an Zone-related injury and the management of health and safety risk.
- e) I confirm that I have read the objectives and visit topics, with the expected duration of participation, with the description of the any procedures to be followed.
- f) I recognize that photos and videos of the visit will be made. My face will be shown, unless I have informed the organization that I do not agree with this. My name and other aspects of confidentiality will remain secure. Notes and personal data will be subject to policies protecting anonymity of individuals and institutions.
- g) I have been informed that insurance responsibility of the organizer is only up to the insurance value. The organizers Thorsten Hackl, Alfred Hamers and Hans van Mensvoort will not accept any liability for any loss of life, personal injury or property damage. Attendees are to make their own arrangements for appropriate insurance cover for during the exercise.

I consent

I do not consent

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Date

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Name and surname

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Signature