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1. *“I agree and will ensure that as an instructor, I will provide a sufficient basis for the interpretation of program information by informing participants of limitations of the content being taught, including contradictory evidence and its source.”*

2. *“I agree and will ensure, if needed, to clearly describe any commercial support for the CE program, presentation, or instructor to program participants at the time the CE program begins. In addition, I will disclose any other relationship that could be reasonably construed as a conflict of interest.”*

Please list any conflict of interest below.

Conflicts of Interest:

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2. use my name; and
3. record my voice and/or comments, either written or spoken

You understand and agree that your name, photograph (as defined above), videotape of your session, voice, comments written or spoken or other such recording (“Recording”) may be published in either a print or media format such as television, radio, internet, podcasting or any other form of publication (“Publish” or “Publication”) and by signing this Permission Form you hereby grant the SCP the non-exclusive right to Publish the Recording. Further, you hereby grant permission to record the above mentioned session in its entirety, at the discretion of the SCP.

Presentation Title: \_\_\_\_\_

Speaker Name: \_\_\_\_\_

Speaker signature: \_\_\_\_\_

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