

Student Online Course Waiver

I, the undersigned student, acknowledge that I am taking an online course as taught by an Instructor of the International BodyTalk Association (IBA). I understand that there are certain limitations to learning in an online format as well as certain privacy limitations, and in order to attend the course _____ (seminar name) with _____ (Instructor) on _____ (dates), I agree

to all the terms laid out below 

- I will keep my video on for the duration of the course so the Instructor can see me.
- I will keep my sound muted except when I have a question or when the Instructor asks me a question.
- I will ensure that I am in an environment where background noise will be negligible when I am asked to participate or have a question.
- I will not step away from my computer during class time.
- I will watch the class in an environment where I will not have any distractions or interruptions.
- I will keep my phone off during class to prevent me from being distracted.
- I will not display distracting or disturbing images or behaviors on my video screen.
- I will not use the chat window  on Zoom unless the Instructor specifically tells me to, and if I do use the chat feature, I will keep my comments respectful and on topic.
- I will participate to the best of my ability when the Instructor asks for active participation.
- If the Instructor notifies me in advance that I need to have a friend or family member present to demonstrate or practice on at a certain time, I will arrange that in advance.
- I will be in attendance for the entire duration of the course. If I cannot be in full attendance, I must consider registering for another course where I can attend in full.
- I will not video record all or any part of the course due to very strict international guidelines that respect student confidentiality and privacy.
- I will not share any of the charts or written material I receive during the course from the Instructor with any other person or parties who were not also in attendance at the same course.

- I understand the Instructor will not provide any video recordings of all or any part of the course to me, other students, or the IBA .
- I understand that if I wish to audio record all or any part of the course, I may do so ONLY IF I read, sign, and return to the Instructor the Release Form to Permit Audio Recording.
- I understand that audio recording software and costs are my own responsibility and expense.
- I understand that in the event that a bad internet connection or power outage causes me to miss portions of the course, I may not graduate from the course unless I retake the portions of the course that I missed from the Instructor at a later date. If the portions of the course that I missed are not substantial or critical, I may request from the Instructor an audio recording of the portions I missed, and I will only receive these recordings if I agree to and sign the Release Form to Permit Audio Recording.
- I understand that the course is being audio recorded by the Instructor to share with the IBA only in the event of an Instructor Review, and I understand that if there is any Protected Health Information (PHI) or Personally Identifiable Information (PII) that I choose to share, that it will be a part of the audio recording and I have consented as such. I hold harmless the Instructor and the IBA for any information that may be shared by other students regarding the PHI and PII that I share.
- I understand that other students or volunteers may share their own PHI and PII during the course and I agree to respect their privacy and confidentiality and will not share those details in any manner such as but not limited to: verbal, electronic or written format.
- Because the course will be conducted through Zoom and the audio recording of the course may be temporarily stored on the Zoom cloud, I acknowledge and agree to the terms of [Zoom's Privacy Policy](#).
- I understand that the Instructor will keep audio recordings of the course secure and that any sharing of the audio file with students or the IBA will be done through secure methods of sharing files.
- I understand that by signing this form, I give my permission to the Instructor to audio record the course and for the IBA to review said audio recording in the event that an Instructor Review is conducted for the purposes of quality control.
- I understand that by signing this form, I give my permission to other class students who have signed the Release Form to Permit Audio Recording (which is printed in partial below) to audio record the course.
- I understand and hereby consent that there is a risk that another student could abuse the privilege to make recordings of the course constituting a violation of the Student Waiver and take, use and reproduce photographs and audio and/or video recordings against my consent. No claim of any kind will be made by me against the Instructor or the IBA because of or arising out of the taking and use of these images, video, or audio by a student. This release is given in exchange for valuable consideration, including the course to which it applies.

- I understand that this release is binding upon me, and my heirs, legal representatives, and assigns.
- I understand that an IBA representative may attend portions of the Instructor's course, and I am willing to allow for this minor disruption.
- I understand that the online teaching format is a newer method of teaching for some Instructors of the IBA; as such, I understand that this may be a learning process for the Instructor and it may not go completely smoothly or without mistakes or interruptions.
- I understand that having a reliable internet connection and knowing how to operate and connect through the Zoom videoconferencing software is my responsibility. If I have issues, I will not hold the Instructor or the IBA liable.
- I understand that if I miss significant (as determined by the instructor) portions of the course due to internet or technology issues on my side, that I may not graduate or receive CEU credits for the course and it will be the Instructor's determination as to whether or not I am able to receive a refund or if I may monitor (re-take) a future course or portions of a future course at a reduced cost.
- I understand that in order for the Instructor to give me the Zoom link to attend the course, I must return a signed, initialed and dated copy of this Waiver to the Instructor in advance of the course. *(Note, if you don't have a scanner, simply take a photo of the form on your phone and email or text it to your Instructor.)*

Printed Name

Student Signature

Date

Note that all students who sign the separate "Release Form to Permit Audio Recording" will have agreed to the following:

I agree that this audio recording shall be used solely for the purposes of individual private study by only the undersigned, and that the recording(s) shall not be sold, shared, transferred, re-recorded, or published in any way. I agree to save the recordings to a separate thumb drive or external hard drive and will not store them on my local computer where they are not secure. I agree to destroy the recordings when they are no longer needed for purposes of my private study. I agree that I am responsible for all costs associated with making the audio recording(s). I acknowledge that abuse of the privilege to make audio recordings of the course material constitutes a violation of the IBA's policies, as well as a violation of international guidelines that respect student confidentiality and privacy. I acknowledge that such violations will, at a minimum, result in the loss of such privileges in the future with any IBA Instructor, and may involve legal action.