

ACM Permission and Release Form

TITLE OF NON-ACM WORK _____

DESCRIPTION OF MATERIAL ___ DEMONSTRATION Description

TITLE OF ACM PUBLICATION ___ CHI 2002 Conference Extended Abstracts

I hereby grant permission for ACM to include the above-named material (the *Material*) in any and all forms, in the above-named publication. I further grant permission for ACM to distribute or sell this submission as part of the above-named publication in print and electronic form, and as part of the ACM Digital Library, on CD-ROM and in translation, or on videocassette, broadcast, cablecast, laserdisc, multimedia or any other media format now or hereafter known. (*Not all forms of media will be utilized.*)

In the event that any elements used in the Material contain the work of third-party individuals, I understand that it is my responsibility to secure any necessary permissions and/or licenses and will provide it in writing to ACM. If the copyright holder requires a citation to a copyrighted work, I have obtained the correct wording and have included it in the designated space in the text.

I hereby release and discharge ACM and other publication sponsors and organizers from any and all liability arising out of my inclusion in the publication, or in connection with the performance of any of the activities described in this document as permitted herein. This includes, but is not limited to, my right of privacy or publicity, copyright, patent rights, trade secret rights, moral rights or trademark rights.

All permissions and releases granted by me herein shall be effective in perpetuity and throughout the universe, and extend and apply to the ACM and its assigns, contractors, sublicensed distributors, successors and agents.

The following statement of copyright ownership will be displayed with the Material, unless otherwise specified: **"Copyright is held by the author/owner."** ACM reserves the right to provide a hyperlink to the author's site if the Material is used in electronic media.

___ I have not used third-party material.

___ I have the necessary permission to use third-party material.

SIGNATURE (author/owner)

PRINT NAME

DATE

Please Return This Form To:

SHERIDAN PRINTING
Att'n: Lisa Tolles-Efinger
1425 Third Avenue
Alpha, NJ 08865 (USA)
1-908-213-8988
fax: 1-908-454-2554