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**Title of Project:**

Bury the Wren

**Sponsor:**

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This consent form, a copy of which has been given to you, is only part of the process of informed consent. If you want more details about something mentioned here, or information not included here, you should feel free to ask. Please take the time to read this carefully and to understand any accompanying information.

The University of Calgary Conjoint Faculties Research Ethics Board has approved this research study. Participation is completely voluntary and confidential. You are free to discontinue participation at any time during the study.

**Purpose of the Study**

Reality is often blurred in drama and computer science. Telling a story on the stage has evolved with digital technologies. As these changes reach further into the live space of the theatre, the perception and experience of the performance changes. We seek to study the ability of virtual reality to affect the perception of reality during a live theatre performance.

**What Will I Be Asked To Do?**

Before the performance, you will be asked to fill out a short survey about your previous experience with virtual reality and live theatre. When the performance begins, you will enter the physical space where a participant is immersed in a VR environment. You will tell the story, improvising within the context of a script and act as a guide for the participant through the experience. When the performance ends you will be asked to fill out another survey about your thoughts on the performance and your experience acting with a participant who is in virtual reality.

The performance and survey will take approximately 30 minutes in total (15 minutes in the performance, 15 minutes answering the survey questions).

We want to video record the performance as you act. This will be used to compare and analyse your experience and observations of the performance with the information provided by your survey answers.

Participation in the study is completely voluntary and you may refuse to participate altogether, refuse to participate in parts of the study, decline to answer any and all questions, and may withdraw from the study at any time without penalty.

### **What Type of Personal Information Will Be Collected?**

No personal identifying information will be collected in this study, and all participants shall remain anonymous.

Should you agree to participate, you will be asked to provide your gender and age.

All video recordings will not be shown in public and will be encrypted to maintain privacy and security.

There is only one option for you to consider if you decide to take part in this research. You can choose one or none. Please review and choose Yes or No:

I grant permission to be video recorded:      Yes: \_\_\_\_ No: \_\_\_\_

### **Are there Risks or Benefits if I Participate?**

We do not foresee any risks from your participation. Like all theatrical experiences, participation in this research may include some surprising and emotionally impactful experiences. These elements may be felt even more intensely in a virtual reality environment. If you are at all concerned that you may find such experiences upsetting, please do not participate.

### **What Happens to the Information I Provide?**

The information collected will only be available to the principal investigator and the research assistants who make up the totality of the research team.

Your anonymity will be ensured by using a coded system to reference the data collected where no personal information is revealed.

You may choose to withdraw from the study up to two weeks from the date of your participation. At the time of your withdrawal, your data will be deleted.

No one except the researchers and their supervisor will be allowed to see or hear any of the answers to the questionnaire or view the video recordings. There are no names on the surveys. Only group information will be summarized for any presentation or publication of results. The surveys are kept in a password protected and encrypted database only accessible by the researchers and their supervisor.

Your signature on this form indicates that 1) you understand to your satisfaction the information provided to you about your participation in this research project, and 2) you agree to participate in the research project.

In no way does this waive your legal rights nor release the investigators, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Participant's Name: (please print) \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Researcher's Name: (please print) \_\_\_\_\_

Researcher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Questions/Concerns**

If you have any further questions or want clarification regarding this research and/or your participation, please contact:

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Department of Drama, Faculty of Arts  
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Supervisor  
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If you have any concerns about the way you've been treated as a participant, please contact the Research Ethics Analyst, Research Services Office, University of Calgary at (403) 220-6289/220-4283; email [cfreb@ucalgary.ca](mailto:cfreb@ucalgary.ca). A copy of this consent form has been given to you to keep for your records and reference. The investigator has kept a copy of the consent form.