**PUBLISHING AUTHORIZATION***EHA-SfPM Precision Medicine Meeting:*

*Bridging between functional and genomic precision medicine*

*September 25-27, 2024*

**FOR:** European Hematology Association (hereinafter, referred to as: “**EHA**”)

**PUBLISHING OF MATERIAL:** Material, activity and/or recording of the Undersigned with the title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “**Material**”)

**ON/IN:** EHA websites, portals, mobile learning apps, platforms, (digital) course material or in whatever electronic, printed or other forms of communication (“**EHA Communications**”).

1. My Material may include, charts, slides, drawings, photographs, texts, illustrations, summaries, outlines, video files, videos of myself, voiceovers and other materials, all of which shall be referred to as the “**Material**”.

2. Any statement in my Material reflects my personal view or opinion. My statements are supported by my personal background, knowledge on the subject, knowledge of recent peer reviewed publications and congress presentations.

3. I authorize EHA to make my Material available in EHA Communications to EHA audiences, amongst whom members attending the event (the “**EHA Audiences**). This means and includes (without limitation), notably;

* the right to record and reproduce it on any electronic medium;
* to display or to broadcast it in an electronic format;
* to adapt the Material in order to fit users' equipment;
* to meet any other technical requirements; *and*
* to create translations of the Material in transcript, subtitle or annotation form.

4. EHA is entitled to publish or otherwise make the Material available in full or partially, such at the discretion of EHA. EHA has no obligation to use or publish the Material.

5. In such EHA Communications, I will be credited as author or co-author. I acknowledge that EHA may accomplish the publication of this Material through one or more designated contractors or representatives performing services on EHA’s behalf (“**Designee**”).

6. I understand that my permission will entitle EHA to store the Material on servers and other hosting platforms under control of EHA, and/or a Designee.

7. I represent and warrant that the Material is original and that I am the author and legally entitled to grant this permission, and that I am not bound by any restrictions from third parties, such as research institutes, my employer, co-authors, sponsors or financiers.

8. Because neither EHA, nor any Designee will be making any changes in the substance of the Material, except for necessary technical manipulations and language changes required for accurate translation, neither I nor anyone acting on my behalf shall hold EHA, nor any Designee liable for any claims, actions or damages resulting from the publication, viewing or use of the Material.

9. I shall hold EHA, and/or its Designee harmless against (a) any claims from third parties that the Material infringe the rights of such third parties and/or (b) any claims that result from the use of the Material by EHA and Audiences.

10. Although EHA forbids the EHA Audiences to republish any of the Materials accessible via EHA Communications, I agree that neither EHA, nor its Designee can be held liable for any such unauthorized republication by EHA Audiences.

11. In the event I become aware of any content related problems (copyright clearance issues; mistakes in the accuracy of information, accidental disclosure of protected information, etc.), I will inform EHA immediately in writing. EHA can remove the Material of the EHA Communications.

12. I represent that the personal data contained in the Material, including but not limited to the special categories of personal data (e.g. health data, genetic and biometric data) processed prior to the date of the Publishing Authorization for the purposes of the scientific research as may be referred to in the Material, has either been duly made anonymous/de-identified (with no direct or indirect link to a person) or the necessary explicit consent/authorization/release relating to the processing of the personal data for the purposes of the Publishing Authorization has been duly obtained in compliance with the applicable data protection laws.

13. For accreditation purposes, I accept to share my full name, institution details, details of affiliations and contact details as included in/linked to the Material with Accrediting Bodies when EHA applies for accreditation or send detailed activity reports on my Material so that learners may claim/obtain their professional credits, points, participation confirmation, and certification (As this is mandatory and withdrawal is not possible).

14. I will transmit any notice to be provided under this Publishing Authorization in writing by email to: scientificmeetings@ehaweb.org or by mail to European Hematology Association, Koninginnegracht 12b, 2514 AA, The Hague, The Netherlands

15. This declaration is governed by the laws of The Netherlands. Any dispute about this Publishing Authorization and/or the publication shall be exclusively submitted to the district court in The Hague, The Netherlands.

- I agree to share a non-editable PDF/PPT version of the Material to download:
YES□ NO□

- I request that the materials indicated below (or that I will provide at a later stage) be hidden from view when the Material is published outside of EHA and/or after September 25-27, 2024:
YES□ NO□

Content to be hidden from the publishing of the Material/ Activity:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Section/slide/ref number | Section/slide/ref number | Section/slide/ref number |
| #1 |  |  |  |
| #2 |  |  |  |
| #3 |  |  |  |
| #4 |  |  |  |
| #5 |  |  |  |
| #6 |  |  |  |
| #7 |  |  |  |

And I have signed this Publishing Authorization in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2024

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_