



PARENTAL CONSENT FORM

Please print out and fill this form and return it to Ubisoft by fax at 514-490-0882 (Montreal & Toronto), 418-524-1266 (Quebec) or by mail at one of the following address:

Ubisoft Divertissements Inc. – Playtests
5505 boulevard Saint Laurent, Suite 5000,
Montreal (Quebec) H2T 1S6

Ubisoft Divertissements Inc. –
Laboratoire
390 Charest Est, Suite 800,
Quebec (Quebec) G1K 3H4

Ubisoft Entertainment Inc. – Playtest
224 Wallace Avenue, Suite 200
Toronto (Ontario) M6H 1V7

I, Mr / Mrs _____,
living at _____,
parent or legal guardian of _____, allow my child, who is
minor, to participate in the "Playtests" of video games organized by Ubisoft Divertissements Inc. ("Ubisoft") and taking
place in all or partly in Ubisoft's offices, located at one of the addresses mentioned above, pursuant to the conditions
described on https://playtest-secure.ubi.com/.

In addition, I discharge Ubisoft of any responsibility towards my child, and any person accompanying him/her, in case
of an accident taking place for the duration of his or her participation of the aforementioned playtest, whether within
Ubisoft premises or during his or her travels to or from Ubisoft. I shall keep and cause to be kept confidential all
confidential information of Ubisoft to which my child or any person accompanying him/her may have access when
entering into Ubisoft's premises for the playtests.

I expressly accept that the participation of my child in the aforementioned test is done entirely of my own
responsibility. I declare that my child is totally able to take part in this activity, in particular that my child does not suffer
from epilepsy. Besides, I acknowledge and agree that Ubisoft shall have the right (but not the obligation) to use and
display my child's name as a tester in the credits of the video games he/she tested.

CHILD'S INFORMATION

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ PHONE NUMBER: _____

ADDRESS: _____

E-MAIL: _____

Which consoles does (he/she) play most often, either at home or at friend's houses?

What kind of game does (he/she) play most often? Could you name a few titles?

PARENT'S INFORMATION

FIRST NAME: _____ LAST NAME: _____

PHONE NUMBER: _____ E-MAIL: _____

By signing below, I confirm that I am the parent or legal guardian of such child, and hereby grant permission to Ubisoft
to collect and store in its files the information detailed on this form and my child's personal information for the purpose
of keeping evidence of my authorisation.

Signature : _____ on ____ / ____ / _____

If for any reason you wish to view, correct or delete the personal information collected about you or your child,
please contact us at:

- playtest@ubisoft.com (Montreal)
quebeclab@ubisoft.com (Quebec)
torontolab@ubisoft.com (Toronto)