

**COMPLIANCE WITH STANDARD OPERATING PROCEDURES
QUEEN'S MRI FACILITY**

I hereby declare that I have thoroughly read, and have understood, all of the Standard Operating Procedures (SOP's) of the Queen's MRI Facility.

I agree to comply with these Standard Operating Procedures at all times when using the Facility space and equipment.

Name (print)_____

Signature_____

Date_____

Please send completed form to:

Donald Brien
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