

**Walter Reed Army Institute of Research (WRAIR), Institutional Review Board (IRB)**

Date of Meeting: \_\_\_\_\_

Guests of the WRAIR IRB

Guests of the WRAIR IRB hereby agree not to use the Confidential Information disclosed in today's meeting in any way, or to manufacture or test any product embodying Confidential Information.

No Disclosure. Guests of the WRAIR IRB agree to use their best efforts to prevent and protect the Confidential Information, or any part thereof, from disclosure to any person other than Recipient's employees having a need for disclosure in connection with Recipient's authorized use of the Confidential Information.

DISCLOSER representing the  
WRAIR IRB

Guest RECIPIENT of the WRAIR IRB

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: Administrative Director,  
WRAIR IRB

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_