

NIH OligoTox Open Data Challenge Participant Registration

Section 1:

I am registering for this Challenge as a(n):

- ☐ **INDIVIDUAL** (*i.e.* on behalf of myself). ^a If you checked this box, you must complete Section 2.
- ☐ **TEAM** (*i.e.* on behalf of a group of individuals). ^b If you checked this box, you must complete Section 3.
- ☐ **ENTITY** (*i.e.* on behalf of a legally established organization, institution, or corporation). ^c If you checked this box, you must complete Section 4.

If permitted by the Challenge rules^d and consistent with the purpose and the terms and conditions of the award, do you intend to use Federal funds from a grant award, cooperative agreement, or other transaction (OT) award to develop your Challenge submission or to fund efforts in support of your Challenge submission?

- ☐ Yes
- ☐ No

^a To be eligible to win a monetary prize under this Challenge, a Participant registering on behalf of themselves (*i.e.* as an INDIVIDUAL) must be a citizen or permanent resident of the United States. Non-U.S. citizens and non-permanent residents are not eligible to win a monetary prize (in whole or in part).

^b To be eligible to win a monetary prize under this Challenge, a Participant registering on behalf of a group of individuals (*i.e.* as a TEAM) must be a citizen or permanent resident of the United States. However, non-U.S. citizens and non-permanent residents can participate as a member of a TEAM that otherwise satisfies the eligibility criteria. Non-U.S. citizens and non-permanent residents are not eligible to win a monetary prize (in whole or in part). Their participation as part of a winning TEAM, if applicable, may be recognized when the results are announced.

^c For a legally established organization, institution, or corporation (*i.e.* an ENTITY) to be eligible to win a monetary prize under this Challenge, the ENTITY must be incorporated in and maintain a primary place of business in the United States.

^d Participants may not use Federal funds from a grant award, cooperative agreement, or other transaction (OT) award to develop their Challenge submission or to fund efforts in support of their Challenge submission unless use of such funds is consistent with the purpose, terms, and conditions of the grant award, cooperative agreement, or OT award. Each Participant (whether participating as an individual, group of individuals, or entity) intending to use Federal grant, cooperative agreement, or OT award funds must register for and participate in the Challenge as an entity on behalf of the awardee institution, organization, or entity. If a winning Participant uses Federal grant, cooperative agreement, or OT award funds to participate in the Challenge, the prize must be treated as program income for purposes of the original grant, cooperative agreement, or OT award in accordance with applicable Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards [2 CFR § 200]. Federal contractors may not use federal funds from a contract to develop their Challenge submissions or to fund efforts in support of their Challenge submissions.

NOTE: If you check YES, then you must register as an ENTITY (see Section 4) and participate on behalf of the entity that is the awardee or recipient of the grant or cooperative agreement or other transaction (OT) award.

Section 2 (INDIVIDUAL):

If you are registering for this Challenge as an INDIVIDUAL (i.e. on your OWN behalf and **NOT** on behalf of a TEAM or an ENTITY), provide your name and contact information as follows:

Last Name: _____ First Name: _____ Middle Name: _____

Phone Number: _____ Email: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Affiliation (for biographical purposes only): _____

Additionally, complete the following certification:

☐ I have read and understand the official eligibility criteria, rules, and requirements of the Challenge as stated in the *Announcement of Requirements and Registration for the OligoTox Open Data Challenge*. I agree that to participate in the Challenge, I must comply with the official eligibility criteria, rules, and requirements and that my participation in this Challenge constitutes my full and unconditional agreement to abide by them.

_____	_____	_____
Signature	Print Name	Date

Section 3 (TEAM):

If you are registering for this Challenge on behalf of a TEAM (i.e. you and all members are participating on your own behalf and **NOT** on behalf of an ENTITY), provide the following information about the TEAM LEADER:

Last Name: _____ First Name: _____ Middle Name: _____

Phone Number: _____ Email: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Affiliation (*optional*): _____

TEAM Name: _____

Also, provide the name(s) and contact information for each member of the TEAM:

- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- [attach additional names as necessary]

Additionally, the TEAM LEADER and EACH TEAM MEMBER must complete the following certification:

☐ I have read and understand the official eligibility criteria, rules, and requirements of the Challenge as stated in the *Announcement of Requirements and Registration for the OligoTox Open Data Challenge*. I agree that to participate in the Challenge, I must comply with the official eligibility criteria, rules, and requirements and that my participation in this Challenge constitutes my full and unconditional agreement to abide by them.

_____ Signature	_____ Print Name	_____ Date
_____ Signature	_____ Print Name	_____ Date
_____ Signature	_____ Print Name	_____ Date

[attach additional names as necessary]

Section 4 (ENTITY):

If you (alone or with multiple individuals) are registering for this Challenge on behalf of an ENTITY (*i.e.*, you and others, as applicable, are **NOT** registering on your own behalf, but you are registering on behalf of an ENTITY), provide the contact information for that ENTITY:

- ENTITY Name: _____
- City, State, Zip Code, Country: _____

Please also provide the following information for a POINT OF CONTACT for the participating ENTITY. The POINT OF CONTACT is the individual who is participating in the challenge on behalf of an ENTITY. If multiple individuals are participating together on behalf of an entity, the POINT OF CONTACT is the lead for the group.

Last Name: _____ First Name: _____ Middle Name: _____

Phone Number: _____ Email: _____

If multiple individuals are participating together on behalf of an entity, provide the name(s) and contact information for all other individuals:

- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- Name: _____ Email: _____ Affiliation: _____
- [attach additional names as necessary]

Additionally, the POINT OF CONTACT must complete the following certification:

☐ I certify that I have the authority to register for this Challenge on behalf of the ENTITY listed above; that the ENTITY meets the eligibility criteria stated in the *Announcement of Requirements and Registration for the OligoTox Open Data Challenge*; and that the ENTITY agrees to comply with the official rules and requirements of the Challenge and that participation in this Challenge constitutes full and unconditional agreement to abide by them.

_____	_____	_____
Signature	Print Name	Date

If multiple individuals are participating together on behalf of an entity, all individuals must complete the following certification:

☐ I have read and understand the official eligibility criteria, rules, and requirements of the Challenge as stated in the *Announcement of Requirements and Registration for the OligoTox Open Data Challenge*. I agree that to participate in the Challenge, I must comply with the official eligibility criteria, rules, and requirements and that my participation in this Challenge constitutes my full and unconditional agreement to abide by them.

_____	_____	_____
Signature	Print Name	Date

_____	_____	_____
Signature	Print Name	Date

[attach additional names as necessary]