HCBI Memorandum of Understanding and Release

This Memorandum of Understanding (MOU) will serve as an agreement between the Harvard Center for Biological Imaging (“HCBI”) at Harvard University (“UNIVERSITY”); __________________ (“USER”), a student or employee conducting research for or on behalf of The Broad Institute, Inc. (“INSTITUTION”), and said INSTITUTION, regarding the USER’s use of the HCBI facilities.

1. Background
This MOU will serve to establish the terms and conditions under which the USER from INSTITUTION shall use HCBI facilities at the UNIVERSITY.

By signature and approval of this MOU, the INSTITUTION and the USER have (a) read, understood and agreed to the terms of the MOU; (2) have been provided information by the UNIVERSITY and HCBI regarding the use of HCBI facilities, including safety training; (3) have reviewed and understand such information; and (4) have been given the full opportunity to ask the UNIVERSITY and HCBI questions it may have about such information.

2. Project Terms
a) Description of Work
A description of the work proposed to be performed at HCBI shall be provided by the USER prior to the commencement of such work hereunder. No substantive deviation from said statement of work will be permitted unless first agreed to in writing by HCBI.

b) Reasonable Efforts
The USER and INSTITUTION acknowledge that USER retains ultimate responsibility for his/her project progress and development and that NEITHER HCBI NOR UNIVERSITY IN ANY WAY WARRANTS OR ASSURES ANY RESULTS, COMMERCIAL VIABILITY, MERCHANTABILITY OR USEFULNESS OF ANY PARTICULAR PROJECT(S). The USER and INSTITUTION fully understand and agree that any work done or service provided by HCBI and its employees is on a reasonable efforts basis. The USER accepts full responsibility for the progress and results of his/her project(s).

c) Payment
The INSTITUTION acknowledges the responsibility for payment to the UNIVERSITY for purchases, materials costs, and use fees incurred by the USER for use of HCBI facilities and at other UNIVERSITY departmental stockrooms. HCBI shall invoice the INSTITUTION for costs incurred by INSTITUTION hereunder, and payment in full shall be made by INSTITUTION within thirty (30) days thereof. No terms in any form prepared by USER or INSTITUTION, including Purchase Orders, shall be construed to change any term in this Agreement, and the terms of this MOU shall strictly govern in the event of an inconsistency.

3. Status of USER
The USER understands that he/she is not an employee of the UNIVERSITY and that the UNIVERSITY provides no Worker’s Compensation for the USER’s benefit. The USER is deemed to be acting as a representative and employee of INSTITUTION for all purposes during work on a project in the HCBI facilities. The USER must have his/her own health and accident insurance, the USER is not covered by UNIVERSITY insurance of any kind, and the UNIVERSITY will not be responsible for any medical expenses that the USER may incur. The USER agrees to bear full responsibility for any liability resulting therefrom.

4. User Safety
Although the USER will be informed regarding general safety policy prior to being allowed to use the facilities, the USER assumes responsibility for his/her own personal safety. It is expected that the USER will operate all instruments and equipment in a safe and professional manner, consistent with the operating instructions and the facility polices. The USER represents that his/her knowledge of laboratory practices is adequate to permit the safe
pursuit of the research work in conjunction with the USER’s specific project. The UNIVERSITY and HCBI shall have the right to immediately prohibit further use by the USER if HCBI, in its sole discretion, believes that the USER has breached this representation.

5. Appropriate Conduct
The USER agrees to observe all applicable governmental, UNIVERSITY, and HCBI policies, rules and regulations that pertain to his/her conduct on campus and at HCBI. The USER agrees that HCBI or the UNIVERSITY may require him/her to leave HCBI if it believes that the USER has violated a policy, rule or regulation, or if it believes that the USER’s conduct is inappropriate.

6. Liability
The INSTITUTION acknowledges responsibility for general liability and maintains such health and accident insurance as it may carry for the USER while he/she is working at HCBI facilities. The USER knowingly assumes all the risks and responsibilities surrounding his/her use of and access to HCBI facilities. The USER and the INSTITUTION understand that use of HCBI facilities may involve exposure to potentially hazardous conditions including, but not limited to, biological, chemical, mechanical, electrical and radiation hazards. The INSTITUTION shall release, hold harmless and indemnify the UNIVERSITY, its current or former officers, faculty, staff, representatives, volunteers, employees, students, other trainees or agents, and current or former members of its governing boards (collectively, "UNIVERSITY INDEMNEES") from any and all claims, damages, costs (including reasonable attorney fees) and liabilities arising out of the USER’s use of HCBI’s facilities, than such as results from the negligence of the UNIVERSITY or UNIVERSITY INDEMNEES. The UNIVERSITY and UNIVERSITY INDEMNEES shall hold no liability with respect to any loss, damages or claims incurred by the INSTITUTION or USER in connection with the USER’s use of the facilities described. The INSTITUTION also acknowledges that it is financially liable for equipment or other property damage if it is found to result from gross negligence or willful misconduct by the USER.

7. Intellectual Property
HCBI operates as a shared-use facility, and the UNIVERSITY shall make no claim to co-own USER-created intellectual property based solely on the USER’s use of the UNIVERSITY’s facilities. The USER and INSTITUTION acknowledge that the commercial viability of any technique developed at HCBI facilities is subject to the existing intellectual property rights of the UNIVERSITY and other third-party rights holders. The UNIVERSITY makes no guarantee that techniques developed at HCBI facilities are not covered by its own or a third party’s intellectual property. The USER and the INSTITUTION further acknowledge that the UNIVERSITY may claim partial ownership of intellectual property that the USER co-develops with HCBI staff or other UNIVERSITY personnel.

8. Confidentiality
The USER and INSTITUTION agree not to disclose to a third party, or use, directly or indirectly, any proprietary or confidential research, data, trade secrets, or other similar information of which the USER and INSTITUTION may become aware as a result of the USER’s activities at HCBI. The USER and INSTITUTION further acknowledge that the UNIVERSITY and HCBI Staff have no obligation either to preserve the confidentiality of information USER or INSTITUTION may disclose to HCBI Staff.

9. HCBI Requirements
The USER certifies that he/she will under no circumstances (a) schedule time for facility use for another person in the USER’s name (whether other user is qualified or not), (b) give out the USER’s HCBI User Name and/or Password for use by other persons, (c) give other persons access to the USER’s facility-access swipe card or (d) otherwise assist others with unauthorized access to any controlled facility at the UNIVERSITY. HCBI reserves the right to deny future access to the USER in the event of breach of this policy.
The INSTITUTION warrants that it has fully read and agree with this Agreement.

**INSTITUTION:** ________________________________

Officer: __________________________ Title: ________________________________

Signature: ________________________ Date: ________________________________

**Read and Acknowledged:**

**USER:** __________________________

Title: ________________________________

Signature: ________________________ Date: ________________________________

**Principal Investigator:** __________

Title: ________________________________

Signature: ________________________ Date: ________________________________

**Harvard Center for Biological Research (HCBI) at Harvard University**

Officer: __________________________

Title: ________________________________

Signature: ________________________ Date: ________________________________