

Consent form

Statement by participant #

- I confirm that I have read and understood this information sheet and the invitation to participate
- I confirm that I am over 18 years old
- I confirm that I am not and will not be taking any prescription medication for the duration of the study
- I confirm that I am not classed as a vulnerable person
- I understand:
 - The purpose, risks, and benefits of taking part in this session
 - What my involvement will entail and any questions have been answered to my satisfaction
 - That my participation is entirely voluntary, and that I can withdraw at any time without prejudice
 - That all information obtained will be confidential
 - That research data gathered for the study may be published provided that I cannot be identified
 - Video/audio clips may be recorded
- Contact information has been provided should I wish to seek further information from the investigator at any time for purposes of clarification
- I do/do not agree to a video recording being used as whole or in part, as part of a presentation for the findings.

First Name	Telephone number for receiving SMS messages	Address for receiving the study pack

I agree to participate in this study under the conditions set out in the information sheet.

Participant's Signature Date:

Statement by investigator

I have explained this study and the implications of participation in it to this participant without bias and I believe that the consent is informed and that he/she understands the implications of participation.

Name of investigator: [Name]

Investigator's Signature Date: