

***Liberate From Sugar, Mate!***

**PARTICIPANT CONSENT FORM - INDIVIDUAL**

I have read and I understand the Information Sheet about the study. I have had the details of the study explained to me, any questions I had have been answered to my satisfaction, and I understand that I may ask further questions at any time. I have been given sufficient time to consider whether to participate in this study and I understand participation is voluntary and that I may withdraw from the study at any time.

1. I agree to participate in this study under the conditions set out in the Information Sheet.
2. I agree to take photos of any treatments being orally administered (i.e. any mints I am given) under the conditions set out in the Information Sheet.

**Declaration by Participant:**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [print full name] hereby consent to take part in this study.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you willing to be contacted regarding future research projects within the School of Sport, Exercise and Nutrition? Your name and email address will be saved in a secure location. You will be sent periodic newsletters regarding research studies within the School. You can opt out of this at any time.

□ Tick here if you accept



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**PARTICIPANT CONSENT FORM - INTERVIEWS**

I have read and I understand the Information Sheet about the study. I have had the details of the study explained to me, my questions have been answered to my satisfaction, and I understand that I may ask further questions at any time. I have been given sufficient time to consider whether to participate in this study and I understand participation is voluntary and that I may withdraw from the study at any time.

1. I understand that all the information I provide will be kept confidential to the extent permitted by law, and the names of all people in the study will be kept confidential by the researcher.
2. I agree to participate in the interview under the conditions set out in the Information Sheet.
3. I agree to the interview being sound recorded.

**Declaration by Participant:**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [print full name] hereby consent to take part in this study.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_