Remember to delete the advisory text and update the details in the footer to be specific to the research for which you are seeking ethics review.

**PARENT/GUARDIAN CONSENT FORM**

CUREC Approval Reference:

**[Study Title]**

|  |  |  |
| --- | --- | --- |
|  |  | *Please initial each box* |
| 1 | I confirm that I have read and understand the information sheet version dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily. |  |
| 2 | I understand that our participation is voluntary and that we are free to withdraw at any time, without giving any reason, and without penalty. |  |
| 3 | I understand that only approved BabyLab researchers will have access to the personal data for my child, how this data will be stored, and what will happen to the data at the end of the study. |  |
| 4 | I understand that research data collected during the study may be looked at by authorised people outside the research team. I give permission for these individuals to access our data. |  |
| 5 | I understand that this project has been reviewed by, and received ethics clearance through, the University of Oxford Central University Research Ethics Committee. |  |
| 6 | I understand how this research may be written up and published. |  |
| 7 | I understand how to raise a concern or make a complaint. |  |
| 8 | I consent to images of me and my child being recorded for this study. Any further use will be agreed on an image release form. |  |
| 9 | I agree to take part in the above study with my child. |  |
| **Optional:** | I agree that my contact details can be retained in a secure database so that the researchers can contact me about future studies. | YES/ NO |

 dd / mm / yyyy

Name of Parent Date Signature

 dd / mm / yyyy

Name of person taking consent Date Signature