

CONSENT FORM

Beliefs that Matter

- I have read the information presented in the information letter about a study being conducted by Raymond B. Chiu of McMaster University.
- I have had the opportunity to ask questions about my involvement in this study and to receive additional details I requested.
- I understand that if I agree to participate in this study, I may withdraw from the study during the interview or within a month after the interview.
- I agree to participate in the study, and I have been given a copy of this form.

Signature _____ Date _____

Name of participant (please print) _____

1. I agree that the interview can be audio recorded.

Yes No

2. Would you like to receive a summary of the study's results?

Yes (provide e-mail or mailing address below) No

3. How would you like the honorarium to be paid?

To my name as indicated above (provide contact information below)

Other instructions _____

Please provide your contact information as necessary.

E-mail _____

Telephone _____

Mailing address (for honorarium or study summary)

Age (optional) <20 20-29 30-39 40-49
 50-59 60-69 >70

For Honorarium to Participant

Date	Cheque #	Received (please sign)
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