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CONSENT FORM

INVESTIGATING FACTORS AFFECTING ALCOHOL CONSUMPTION

Please confirm that the following questions to the best of your knowledge by initialling in the boxes provided.

PLEASE	CONFIR	M THAT	YOU:			INITIAL
Are a weekly alcohol drinker (i.e., drink at least one alcoholic drink per week)						
Drink	beer as a d	rink of cho	ice			
Are aged between 18 and 40 years						
Have English as first language, or equivalent level of fluency						
Are in good physical and psychiatric health						
If female, are not pregnant or breast feeding (and I can request a pregnancy test if in any doubt)						
Do not have a personal history or strong familial history of alcoholism						
Consent to the procedures as documented in the information sheet [Version 1.1, 25 th April 2018]						
HAVE YOU:						
Been given information explaining about the study and had an opportunity to ask questions?						
Had an opportunity to ask questions, discuss the study, and receive satisfactory answers to your questions?						
Received enough information about the study for you to make a decision about participation?						
DO YOU UNDERSTAND THAT YOU MAY:						
Withdraw from the study at any time without having to give a reason, and without your medical						
or legal rights being affected?						
Withdraw your data up to one year after the study or until the data are made open for sharing (whichever						
comes first) without having to give a reason?						
I hereby fully and freely consent to my participation in this study						
I understand the nature and purpose of the procedures involved in this study. These have been communicated to me on the information sheet						
accompanying this form [Version 1.1, 25th April 2018]						
I understand and acknowledge that the investigation is designed to promote scientific knowledge. I understand that personal information collected						
during the study may be looked at by individuals from the University of Bristol, regulatory authorities or the funding body of the above study. I give permission for these individuals to have access to personal information under conditions of confidentiality.						
I understand that the anonymized study data collected from me as part of the study will be made available as "open data".						
I understand that the anonymized study data collected for this study may be used in future research projects but that the conditions on this form						
under which I have provided the data will still apply.						
Date					Signature of the participant:	
	Day	Month	Year			
	1 7	ļ	ļ	ı	Print name:	
Signature of the investigator:						
Dignature of the investigator.						
Final consent: Having participated in this study						
I agree to the University of Bristol keeping and processing the personal information that I have provided during the study. I understand that my						
consent is conditional upon the University complying with its duties and obligations under the Data Protection Act. I also understand that						
after the study, anonymized study data will be made available as "open data". This means the anonymized study data will be publicly						
available and may be used for purposes not related to this study. I also understand that these data will be anonymized and it will not be						
possible to identify me from these data. I understand that my screening data will also be anonymised and stored securely by the study team,						
but will not be made "open" (i.e., publicly available).						
Date		16 7	T7	1	Signature of the participant:	
	Day	Month	Year	1		
					Print name:	
Signature of the investigator:						
If you have any concerns related to your participation in this study please direct them to the School of Experimental Psychology Human Research Ethics						