

LETTER OF CONSENT

_____ (Print Name) would like to confirm that I accept to

participate in the FESTIVAL Field trial under the place in	ne framework of the FESTIVAL project that will take
	g from the Information Sheet or explanation already ecide whether to join in. I will be given a copy of this
project, I can notify the researchers involved a reason. Furthermore, I understand that I will b	he research that I no longer wish to participate in this nd withdraw from it immediately without giving any e able to withdraw my data up to three weeks after eventual withdrawal from the trial would have no
	information for the purposes explained to me. led in accordance with the terms of Data Protection ESTIVAL project.
	estures that will be gathered in the context of the their storage in an FESTIVAL-not public-research
	d solely for research purposes in the context of the
Contact details of the participant:	
Name (in capitals):OrganizationGender:Age:	Nationality:E-mail:Telephone:
explained to me to my satisfaction and I agree	Print Name) agree that the research project has been to take part in the study. I have read both the notes the project, and understand what the research study
Signed:	Date:
	Location:



