

CHURCH CONSENT FORM



**Title of Study:** Attitudinal Determinants of diet and lifestyle in women

**Lead researcher:** Dr Amanda Adegboye, University of Westminster

I confirm I am willing to allow the church named below to be used to collect data for this study. Yes  No

I understand what information is going to be collected from participants and how it will be used. Yes  No

I would like to receive information relating to the results from this study. Yes  No

I wish to receive a copy of this Consent form. Yes  No

**Name:** \_\_\_\_\_ **Church Name:** \_\_\_\_\_

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

This consent form will be stored securely and in accordance with the Data Protection Act.

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**For Westminster representative:**

I confirm I have provided a copy of the Church information sheet approved by the ethics committee and have explained what would be required from participants

**Researcher's Name:** \_\_\_\_\_

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