[](https://twitter.com/wetlandLIFE) **Participant Consent Form: Interviews 2018**

**WetlandLIFE: TAKING THE BITE OUT OF WETLANDS  
Managing mosquitoes and the socio-ecological value of wetlands for wellbeing**

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| --- | --- | --- |
|  |  | Please initial or tick box |
| I agree to take part in this research which is to improve wetland management by delivering ecological guidance for managing insect populations, particularly mosquitoes, for healthy wetland environments, and to encourage the recreational use of wetlands to support the health and wellbeing of local human populations. |  |  |
|  |  |  |
| The researcher has explained to my satisfaction the purpose, principles and procedures of the study and the possible risks involved. |  |  |
|  |  |  |
| I have read the information sheet and I understand the principles, procedures and possible risks involved. |  |  |
|  |  |  |
| I am aware that I will be required to answer questions or get involved with group activities such as map marking***.*** |  |  |
|  |  |  |
| I agree to the researcher making audio recordings during the project. |  |  |
|  |  |  |
| I understand how the data collected will be used, and that any confidential information will normally be seen only by the researchers and will not be revealed to anyone else. |  |  |
|  |  |  |
| I understand that I am free to withdraw from the study at any time without giving a reason and without incurring consequences from doing so. |  |  |
|  |  |  |
| I agree that should I withdraw from the study, the data collected up to that point will be deleted. |  |  |
|  |  |  |
| I agree that anonymised data collected may subsequently be archived and used by other bona fide researchers. |  |  |

Name (please print) ……………………………………………………………………………

Signed ……………………………………………………….. Date …………………………

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