

University of Huddersfield
School of Music Humanities and Media

Participant Consent Form (E4) - Experiment

Title of Research Study: The Touch of Embodied Voice. Practical research studies on the vocal training of singers and performers

Name of Researcher: Ilona Krawczyk

Participant Identifier Number:

	Yes	No
I confirm that I have read and understood the Participant Information Sheet related to this research, and have had the opportunity to ask questions.		
I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.		
I understand that the data collected during the experiment include video and audio recordings and that for this reason my participation will not be fully anonymous.		
I give my consent to use the collected data (including my voice and image on video and audio material) in the research and in the relevant publications.		
I give permission for members of the research team to have access to the material collected during the experiment.		
I prefer my name to be included in the published videos.		
* I prefer my name to be replaced by a nickname or a Participant Identifier Number in the thesis of the research and in other publications (including videos and audios).		
I agree to take part in the above study.		

Date:

Date:

Print name of Participant:

Print name of Researcher:

Signature of Participant:

Signature of Researcher:

*** Nickname (if applicable):**