

Project Title: **The Visions of Charles Bonnet Syndrome**

Researchers:

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By signing below, I confirm that I have read and understood the information package and in particular:

- I understand that my involvement in this research will include the co-creation of a Charles Bonnet Syndrome vision;
- I have had any questions answered to my satisfaction;
- I understand the risks involved;
- I understand that there will be no direct benefit to me from my participation in this research;
- I understand that my participation in this research is voluntary;
- I understand that if I have any additional questions I can contact the research team;
- I understand that I am free to withdraw at any time, without explanation or penalty;
- I understand that my name and other personal information that could identify me will be removed or de-identified in publications or presentations resulting from this research;
- I understand that I can contact the Manager, Research Ethics, at Griffith University Human Research Ethics Committee on 3735 4375 (or research-ethics@griffith.edu.au) if I have any concerns about the ethical conduct of the project; and
- I agree to participate in the project.

I consent to the inclusion of my recorded voice in publications or presentations resulting from this research.

I consent to the inclusion of my written and/or verbal comments/opinions in publications or presentations resulting from this research.

Name	
Signature	
Date	