**Informed Consent for Bump ‘n’ Beyond Yoga Classes**

**Please tick the appropriate boxes Yes No**

1. **Taking part in the class**

I have read and understood the client yoga questionnaire.   I have been able to ask questions about the class and my questions have been answered

to my satisfaction.

I consent voluntarily to be a participant in this class and understand that I can refuse to participate  

and I can withdraw from the class at any time, without having to give a reason.

I understand that all relevant information concerning my health, relevant to the practice of yoga

has been disclosed to my yoga teacher  

Describe in a few words how information is captured, using the same terms as you used in the information sheet, for example: an audio-recorded interview, a video-recorded focus group, a survey questionnaire completed by the enumerator, an experiment, etc.].

For interviews, focus groups and observations, specify how the information is recorded (audio, video, written notes).

For questionnaires, specify whether participant or enumerator completes the form.

For audio or video recordings, indicate whether these will be transcribed as text, and whether the recording will be destroyed.

For audio or video recordings, indicate whether these will be transcribed as text, and whether the recording will be destroyed.

1. **Use of the information in the study**

I understand that information I provide will be used for **[**…………………………………….……**]**.  

List the planned outputs, e.g. reports, publications, website, video channel etc., using the same terms as you used in the study information sheet.

Consider whether knowledge sharing and benefits sharing needs to be considered, e.g. for indigenous knowledge.

I understand that personal information collected about me that can identify me, such as my  

 name or where I live, will not be shared beyond the study team.

At times this should be restricted to the researcher only.

If you want to use quotes in research outputs, add: I agree that my information can be quoted  

in research outputs.

If you want to use named quotes, add: I agree that my real name can be used for quotes.  

If written information is provided by the participant (e.g. diary), add: I agree to joint copyright  

 of the **[**specify the data**]** to **[**name of researcher**]**.

1. **Future use and reuse of the information by others**

I give permission for the **[**specify the data**]** that I provide to be deposited in **[**name of data repository**]**  

so it can be used for future research and learning.

Specify in which form the data will be deposited, e.g. de-identified (anonymised) transcripts, audio recording, survey database, etc.; and if needed repeat the statement for each form of data you plan to deposit.

Specify whether deposited data will be de-identified (anonymised), and how. Make sure to describe this in detail in the information sheet.

Specify whether use or access restrictions will apply to the data in future, e.g. exclude commercial use, apply safeguarded access, etc.; and discuss these restrictions with the repository in advance.

**Signatures**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of participant [IN CAPITALS] Signature Date

I have accurately given the information to the potential participant and, to the best of my ability, ensured that the participant understands to what they are freely consenting.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of teacher [IN CAPITALS] Signature Date