



## CONSENT FORM FAITH AND ABORTION STUDY

*This consent form must be read in conjunction with the Research Information Sheet.*

**Project title: Faith and Abortion**

**Research team: Dr. Fiona Bloomer, Dr Noirin MacNamara, Dr Danielle Mackle**  
*Please initial*

I confirm that I have been given and have read and understood the information sheet for the above study and have asked and received answers to any questions raised. [ ]

I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason and without my rights being affected in any way. [ ]

I understand that the researcher will hold all information and data collected securely and in confidence and I give permission for the researchers to hold all relevant personal data. [ ]

I was given an explanation on how the information will be used and in any resulting publications and have asked and received answers to my questions in this respect. [ ]

I consent that an anonymised version of the data can be archived and used for secondary data analysis. [ ]

I agree to take part in the above study. [ ]