



University of
South Australia
Alliance for Research in Exercise, Nutrition
and Activity

PROJECT CONSENT FORM

Project Title: A comparison of two group-based exercise programs (team-sport vs. circuit training) on men's health.

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This project has been approved by the University of South Australia's Human Research Ethics Committee (Ethics Protocol 203274). If you have any ethical concerns about the project or questions about your rights as a participant please contact the Executive Officer of this Committee, Tel: +61 8 8302 6330; Email: humanethics@unisa.edu.au

In signing this form, I confirm that:

- I have read the Participant Information Sheet and the nature and purpose of the research project has been explained to me. I understand and agree to take part.
- I understand the purpose of the research project and my involvement in it; and that prior to participating in the study I may be asked to explain in my own words my understanding of my involvement.
- I understand that I may withdraw from the research project at any stage and that this will not affect my status now or in the future.
- I understand that if I withdraw from the study, I may request that data collected from me be withdrawn from the study up until two weeks after withdrawing.
- I understand that if I withdraw from the study prior to its completion, my data may still be used.
- I understand that while information gained during the study may be published, I will not be identified and my personal results will remain confidential, unless required by law.
- I understand and agree to being randomised to either of the two exercise programs detailed within the Participant Information Sheet.
- I understand that all data will be allocated a participant ID number and stored on the University campus on password protected computers and in secure storage during the study. Following the publication of results, data will be housed in a secure off-site storage facility run by the University and will be destroyed after 5 years.
- I give consent to be contacted for future studies that I may be suitable for: Yes ☐ No ☐.

Name of participant

Signed **Date**

Witness

I have provided (Name of participant) information about the research and believe that he/she understands what is involved.

Researcher's Name

Researcher's signature **Date**

Role in the project