

**Evolution of Disability Arts in Australia**

**QUT Ethics Approval Number 2021000382**

**Research team**

<b>Name</b>	<b>Email</b>	<b>Current Organisation</b>
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**Statement of consent**

**By signing below, you are indicating that you:**

- Have read and understood the information document regarding this research project.
- Have had any questions answered to your satisfaction.
- Understand that if you have any additional questions you can contact the research team.
- Understand that you are free to withdraw without comment or penalty.
- Understand that if you have concerns about the ethical conduct of the research project you can contact the Research Ethics Advisory Team on +61 7 3138 5123 or email [humanethics@qut.edu.au](mailto:humanethics@qut.edu.au).
- Understand that the research project will include a video recording.
- Agree to participate in the research project.

**Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Verbal Consent**

In signing this form at the direction of \_\_\_\_\_, I confirm that he/she/they has read or had read to them, the content of the Information Statement and Consent Form and has made an informed choice to participate.”

\_\_\_\_\_

**Researcher  
Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Please return the signed consent form to the researcher.**