

Child Informed Consent Form

Your child is invited to participate in a survey conducted by Name of Person from the Organization. I hope to learn about fill in the blank.

If you decide to allow your child to participate, they will answer a number of questions about fill in the blank. There are no risks associated with taking this survey. We will not collect identifiable information about your child, such as their name, address, or birthdate.

Information will be shared for all children who take the survey together. We cannot guarantee that your child personally will receive any benefits from taking this survey.

Your child's participation is voluntary. Your decision whether or not to allow your child to participate will not affect you or your child's relationship with the organization, nor their ability to participate in activities with the organization. If you decide to allow your child to participate, you are free to withdraw your consent at any time without penalty.

If you have any questions about the survey, please feel free to contact Name of Person at Phone number or email address.

Your signature indicates that you have read and understand the information provided above, that you willingly agree to allow your child to participate and that you may withdraw your consent at any time and discontinue participation without penalty.

Parent or Legal Guardian Signature

Child's Name

Date