Headed paper

CONSENT FORM

Study – The experience of spiritual healing in women with breast cancer who are receiving long term hormonal therapy

Researcher – Fiona Barlow
Supervisor – Dr. Jan Walker

Please initial inside each box:

I confirm that I have read and understand the information sheet for the above study and have had the opportunity to ask questions.

I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason, without this affecting my relationship with the Harry Edwards Healing Sanctuary.

I agree to the use of video recording equipment during the healing sessions.

I agree to take part in the above study

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Name of healer Signature Date

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Researcher Signature Date

3 copies – patient / researcher/ file