**Child Consent Form**

Your mum or dad said it is OK for you to help us. Do you want to be [describe child’s role in experiment, e.g. a games tester]? You can say “yes” or “no”. It is OK to say “no”. It will not hurt the researchers’ feelings.

* I can choose to [brief description of participant activity].
* I do not have to help if I don’t want to.
* I can stop taking part or take a break if I want to. I do not have to say why.
* It is OK if I change my mind later, and say I don’t want to help anymore.
* It is OK if some activities are hard for me!
* There are no wrong answers to questions.
* Anything I can do is helpful.

|  |  |  |
| --- | --- | --- |
| **Do you want to [brief description of participant activity]?** |  |  |
|  | **Yes** | **No** |

The research will listen to/watch the recordings later. They may show them to other people who [describe secondary use research area, e.g. people who make games for children].

|  |  |  |
| --- | --- | --- |
| **Is it OK to take audio/video recordings? [edit accordingly]?** |  |  |
|  | **Yes** | **No** |

|  |  |  |  |
| --- | --- | --- | --- |
| Write your name: |  | And age |  |

**THANK YOU!**