

## INFORMED CONSENT FORM 2C



CALGARY YOUTH SCIENCE FAIR

You are invited to take part in a research study. Before you decide to be a part of this study, you need to understand the risks and benefits. This consent form provides information about the research. If you agree to participate in this research, you will be asked to sign this consent form before taking part. This process is known as *Informed Consent*.

Student Researcher (1): <u>Naomi Sawyer</u> School: <u>Arbour lake school</u> School Phone: <u>403-777-7310</u>	Student Researcher (2): <u>Naomi Wiebe</u> School: <u>Arbour lake school</u> School Phone: <u>403-777-7310</u>
Project Title: <u>An eye for detail</u>	
Science Fair Coordinator (Adult Supervisor): Name: <u>Suzanne Sawyer</u> Phone: <u>587 897 0784</u>	
Project Description: <u>We will explore how fast humans react to seeing recognizable images through crowds. We will test different people to see how fast they can find letters in crowds and use that data to show how the human brain recognizes and find images.</u>	
Your benefits from participating: <u>We are helping to further research on people's reaction times and which age group has the best (fastest) reaction time.</u>	
Your risks from participating: <u>Eye strains, seizures, headaches.</u>	
Your time commitment: <u>5-10 minutes.</u>	
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Review: This project has been reviewed by the Ethics Committee of the Calgary Youth Science Fair Society and has received permission to proceed.	
Feedback: The results of this research will be provided to you in the public presentation of the Science Fair Project.	
By signing below, you are agreeing to participate in this study.	
Name _____ (please print)	
Signature _____ Date <u>1 Mar 25</u>	
<b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b>	
I give permission for the person named above to participate in this study.	
Name <u>Daniel Sawyer</u> (please print) Phone _____	
Signature _____ Date <u>9 Mar 25</u>	

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By signing below, you are agreeing to participate in this study. Name <u>Adrienne McEwen</u> (please print) Signature <u>[Signature]</u> Date <u>March 15, 2025</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	

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By signing below, you are agreeing to participate in this study. Name <u>KYLE MUEWEN</u> (please print) Signature <u>[Signature]</u> Date <u>MAR 15 2025</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	

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 School: Arbour lake school  
 School Phone: 403-777-7310

Project Title: An eye for detail

Science Fair Coordinator (Adult Supervisor):

Name: Suzanne Sawyer

Phone: 587 897 0784

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By signing below, you are agreeing to participate in this study.

Name Ben Stephenson (please print)

Signature *Ben Stephenson* Date March 11, 2025

**If this participant is under the age of 18, permission of a parent or guardian is also required:**

I give permission for the person named above to participate in this study.

Name \_\_\_\_\_ (please print) Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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By signing below, you are agreeing to participate in this study. Name <u>Alex Lappala</u> (please print) Signature <u>[Signature]</u> Date <u>March 9/15</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	



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By signing below, you are agreeing to participate in this study. Name <u>Maika Faszter</u> (please print) Signature <u>Maika Faszter</u> Date <u>02/03/2025</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	

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By signing below, you are agreeing to participate in this study. Name <u>Suzanne Sawyer</u> (please print) Signature <u>[Signature]</u> Date <u>March 2/25</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	

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By signing below, you are agreeing to participate in this study. Name <u>Maggie Hoffman</u> (please print) Signature <u>[Signature]</u> Date <u>March 9, 2025</u>	
<b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	



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Name <u>Lisa Wang</u> (please print)	
Signature <u>[Signature]</u> Date <u>March 9th 2025</u>	
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Project Title: An eye for detail

Science Fair Coordinator (Adult Supervisor):

Name: Suzanne Sawyer

Phone: 587 897 0784

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Name Elise Wipf (please print)

Signature Elise Wipf Date March 12, 2025

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I give permission for the person named above to participate in this study.

Name (please print) Phone

Signature Date

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By signing below, you are agreeing to participate in this study.

Name Marie Gailer (please print)

Signature Marie Gailer Date Mar 2 2025

**If this participant is under the age of 18, permission of a parent or guardian is also required:**

I give permission for the person named above to participate in this study.

Name \_\_\_\_\_ (please print) Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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By signing below, you are agreeing to participate in this study. Name <u>Jürgen Gailer</u> (please print) Signature <u>[Signature]</u> Date <u>Nov 2, 2015</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name _____ (please print) Phone _____ Signature _____ Date _____	

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School Phone: 403-777-7310

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Name: Suzanne Sawyer

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Name Ryton Thomas (please print)

Signature [Signature] Date March 9 2025

**If this participant is under the age of 18, permission of a parent or guardian is also required:**

I give permission for the person named above to participate in this study.

Name Chris Thomas (please print) Phone 403-478-4037

Signature [Signature] Date Mar 9/2025

# INFORMED CONSENT FORM 2C



CALGARY YOUTH SCIENCE FAIR

You are invited to take part in a research study. Before you decide to be a part of this study, you need to understand the risks and benefits. This consent form provides information about the research. If you agree to participate in this research, you will be asked to sign this consent form before taking part. This process is known as *Informed Consent*.

Student Researcher (1): <u>Naomi Sawyer</u> School: <u>Arbour lake school</u> School Phone: <u>403-777-7310</u>	Student Researcher (2): <u>Naomi Wiebe</u> School: <u>Arbour lake school</u> School Phone: <u>403-777-7310</u>
Project Title: <u>An eye for detail</u>	
Science Fair Coordinator (Adult Supervisor): Name: <u>Suzanne Sawyer</u> Phone: <u>587 897 0784</u>	
Project Description: <u>We will explore how fast humans react to seeing recognizable images through crowds. We will test different people to see how fast they can find letters in crowds and use that data to show how the human brain recognizes and find images.</u>	
Your benefits from participating: <u>We are helping to further research on people's reaction times and which age group has the best (fastest) reaction time.</u>	
Your risks from participating: <u>Eye strains, seizures, headaches.</u>	
Your time commitment: <u>5-10 minutes.</u>	
The confidentiality of your data: The results of this research will be given with all information about individual participants removed. No personal information will be stored on a computer. All information on paper that could be used to identify individuals will be shredded at the end of the research project.	
Withdrawal: Your participation is voluntary, and you have the right to withdraw at any time for any reason. If you wish to do so, please talk to the Science Fair Coordinator/Adult Supervisor.	
Review: This project has been reviewed by the Ethics Committee of the Calgary Youth Science Fair Society and has received permission to proceed.	
Feedback: The results of this research will be provided to you in the public presentation of the Science Fair Project.	
By signing below, you are agreeing to participate in this study. Name <u>Ellie Rose Gailer</u> (please print) Signature <u>EGP</u> Date <u>March 2/25</u>	
<b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name <u>Marie Gailer</u> (please print) Phone <u>403 891 3255</u> Signature <u>Marie Gailer</u> Date <u>Mar 2 2025</u>	



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By signing below, you are agreeing to participate in this study. Name <u>Lucy Freeman</u> (please print) Signature <u>L. Freeman</u> Date <u>mar 15 2025</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name <u>Cal Freeman</u> (please print) Phone <u>403 614 5507</u> Signature <u>Cal Freeman</u> Date <u>March 14 2025</u>	

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By signing below, you are agreeing to participate in this study. Name <u>Rosie McEwen</u> (please print) Signature <u>Rosie McEwen</u> Date <u>March 15, 2025.</u>	
<b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name <u>Adrienne McEwen</u> (please print) Phone <u>403 200 3365</u> Signature <u>[Signature]</u> Date <u>March 15, 2025.</u>	

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By signing below, you are agreeing to participate in this study. Name <u>Jonathan Stephenson</u> (please print) Signature <u>Jonathan</u> Date <u>March 11</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name <u>Ben Stephenson</u> (please print) Phone <u>587-777-8812</u> Signature <u>Ben Stephenson</u> Date <u>March 11, 2025</u>	

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Name <u>Nora Lappala</u> (please print)	
Signature <u>Nora</u> Date <u>March 9th</u>	
<b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b>	
I give permission for the person named above to participate in this study.	
Name <u>Alex Lappala</u> (please print) Phone <u>403 464 5803</u>	
Signature <u>Alex Lappala</u> Date <u>March 9/25</u>	



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By signing below, you are agreeing to participate in this study. Name <u>Eatherine Sawyer</u> (please print) Signature <u>Eatherine Sawyer</u> Date <u>Feb March 2<sup>nd</sup>, 2015</u> <b>If this participant is under the age of 18, permission of a parent or guardian is also required:</b> I give permission for the person named above to participate in this study. Name <u>Suzanne Sawyer</u> (please print) Phone <u>587-897-0784</u> Signature <u>[Signature]</u> Date <u>Mar 2 / 15</u>	