Appendix VII

INFORMED CONSENT FORM

A comparative study of the health related fitness levels of 12 to 13 year old boys of different Ethnic and Socio-Economic backgrounds in Johannesburg

A project conducted by Musawenkosi Johannes Xaba (School of Therapeutic Sciences, Faculty of Health Sciences, Centre for Exercise Science & Sports Medicine, University of The Witwatersrand, Johannesburg)

SIGNATURE OF PARENT

I have read the information provided in the participant information sheet and the parent information sheet. I have been given an opportunity to ask questions and I do my permission for my child to take part in this study.

_____ _____

Name of Parent *Name of Child*

_____ _____

Signature of Parent *Date*

SIGNATURE OF WITNESS

My signature as witness certifies that the subject signed this consent form in my presence as his/her voluntary act and deed.

_____

Name of Witness

_____ _____

Signature of Witness *Date (same as subject's)*

SIGNATURE OF INVESTIGATOR

_____ _____

Signature of Investigator *Date (same as subject's)*