

# Longitudinal Cohort Study Consent Form

**Study Title**

**Principal Investigator**

**Introduction**

**Purpose of the Study**

**Procedures**

**Duration**

**Risks & Benefits**

**Confidentiality**

**Voluntary Participation & Withdrawal**

**Contact Information**

**Consent**

☐ I have read and understood the information above.

☐ I voluntarily agree to participate in this study.

**Participant Name**

**Date**