

## CONSENT FORM

**Study title:** Validation of egocentric distance perception in reality and virtual reality in vista space

**Researcher name:** Matthew Blyth

**ERGO number:** 26625

*Please initial the box(es) if you agree with the statement(s):*

I have read and understood the information sheet (Version 1) and have had the opportunity to ask questions about the study.	
I agree to take part in this research project and agree for my data to be used for the purpose of this study.	
I understand my participation is voluntary and I may withdraw at any time for any reason without my rights being affected.	

**Name of participant** (print name).....

Signature of participant.....

Date.....

**Name of researcher** (print name).....

Signature of researcher .....

Date.....