

GENERATION PUP OPT OUT FORM



OPTING OUT

If you would like to withdraw your consent for some or all of the elements of participation in the Generation Pup study, then this form can be used to let us know your wishes. Please post or email this form back to us using the contact details at the end of the form. Thank you.

YOUR INFORMATION

Title:	First name:	Surname:
Address (required):		Postcode (required):
Name of dog(s) and Generation Pup ID number(s):		

INFORMED CONSENT

You might not have provided consent for all aspects covered here, as some aspects of the study were optional. However, all areas that you might have consented to are included below.

The data and samples (if applicable) that you have already provided are valuable to us. Do you give permission for us to use the data and samples (if applicable) that you have already provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'No', please answer the next two questions</i>
I withdraw my permission for the questionnaire data and other information (e.g. behavioural data) I have already provided to be used for the purposes of research into dog health, behaviour or welfare.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission for any samples that I have already provided to be used for the purposes of research into dog health, behaviour or welfare.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Your future involvement in the study....	
I withdraw my/our permission as the owner(s) of my/our puppy for the Generation Pup team to contact my veterinary practice, and for my veterinary practice to email PDF copies of my puppy's veterinary records to the Generation Pup team.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my/our permission as the owner(s) of my/our puppy for the Generation Pup team to share information I have provided, in order to help the Generation Pup team access my puppy's veterinary records through databases held by other research groups.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my/our permission as the owner(s) of my/our puppy for the Generation Pup team to email a PDF copy of this consent form to the veterinary practice listed above, as evidence of my consent for access to veterinary records.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission for the Generation Pup team to get in touch with me through the contact details I have chosen to supply.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission for the Generation Pup team to send specifically designed Vet Cards to me via post.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am no longer willing to collect samples from my puppy.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am no longer willing to take part in behaviour tests or recording my dog displaying certain behaviours...	<input type="checkbox"/> Yes <input type="checkbox"/> No

I am no longer interested in receiving information from Dogs Trust who sponsor this research project...	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission to being contacted by the Generation Pup team about involvement in related projects.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission to being contacted about my puppy potentially becoming a 'media star'.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I withdraw my permission to being contacted by the Generation Pup team by text and/or phone.	<input type="checkbox"/> Yes <input type="checkbox"/> No

YOUR SIGNATURE

Your signature:	Print your name:	Date:
		d d / m m / y y

Thank you very much for your help in our study to date. If you have any questions about the study, or feedback for us please do not hesitate to contact us by writing to us, e-mailing us at generationpup@dogstrust.org.uk or phoning us on **07434 843460**.

Please return this form by email, or by post to:

**Freepost RTUL–URyc–LEXS
 Generation Pup
 Royal Veterinary College
 Hawkshead House
 Hawkshead Lane
 North Mymms
 HATFIELD
 AL9 7TA**