

**Youth 4 Health
Assent Form**

My name is Dr. Heather McCollum. I am trying to learn about ways youth exercise and what they eat. If you would like, you can be in my study. You will be offered to participate in a free summer sports and nutrition camp with lunch and snacks.

If you decide you want to be in my study, you will be asked to answer some questions about the types of food you have eaten and what you do for exercise. We will also ask you to let us measure your height, take your weight, and measure your waist. We will also request a copy of your school report card for the past year.

Some of the questions you will be asked will be personal. You can refuse to answer a question you are not comfortable answering. You may stop at any time. Your name will not be on any of your answers. We promise to keep your information private. The minimal risks you might face are basic everyday risks, such as falling down while playing or exercising. To lower the risk, an adult will be with you while you are playing or attending any part of the project. You understand Louisiana Tech University is not able to pay for medical treatment should you be hurt as a result of participating in this research.

Other people will not know if you are in my study. I will put things I learn about you together with things I learn about other youth, so no one can tell what things came from you. When I tell other people about my research, I will not use your name, so no one can tell who I am talking about.

Your parents or guardian have to say it's OK for you to be in the study. After they decide, you get to choose if you want to do it too. If you don't want to be in the study, no one will be mad at you. If you want to be in the study now and change your mind later, that's OK. You can stop at any time.

My telephone number is 318-257-4412. You can call me if you have questions about the study or if you decide you don't want to be in the study any more.

I will give you a copy of this form in case you want to ask questions later.

Agreement

I have decided to be in the study even though I know that I don't have to do it. Dr. McCollum has answered all my questions.

Signature of Study Participant

Date

Signature of Researcher

Date