



Elam School of Fine Arts
Building 431, 20 Whitaker Place
Auckland, New Zealand
T +64 9 923 8000
W auckland.ac.nz
The University of Auckland
Private Bag 92019
Auckland 1142
New Zealand

**CONSENT FORM FOR
PARTICIPANT
THIS FORM WILL BE HELD FOR A PERIOD OF 6 YEARS**

Art Project: *Performing Capital*

Name of researcher Aindriu Macfehin

Name of Supervisor(s) Dr. Peter Shand and Mr. James Speers.

I have read the Participant Information Sheet; have understood the nature of the project and why I have been selected.

I have had the opportunity to ask questions and have them answered to my satisfaction.

I agree to take part in this project.

I understand that I am free to withdraw participation at any time up to four weeks after I submit my files, and to withdraw any data traceable to me up to four weeks from when I submit my files without giving a reason.

I understand that the artist has full editing control of the final work.

I understand that the final work will be in the form of an online presentation using digital film, sound, and images and will be presented in a form decided by the artist.

I would/ would not like to be named in the final artwork. I understand that even if I am not named in the final artwork or other publications, there is a possibility that I might be identified.

I give consent to my image and or voice to be used in this work.

I confirm that I will not contravene the laws of my country as part of my participation in this research.”

I confirm that I am of the legal age in my country to consent to participate in this research. (16 years in New Zealand)

Name _____

Signature _____

Date _____

Approved by the University of Auckland Human Participants Ethics Committee on 14-Feb-2017 for three years, Reference Number 018538