

Annex F: Consent for Participation in Events Including Media Engagements

This consent form seeks permission for survivors' participation in various public engagements such as workshops, conferences, focus groups, documentaries, TV and radio shows, newspaper articles, and other public events facilitated by our organization. This is a template and should be adjusted to fit the specific context and event. It should also be used in conjunction with the Consent to Use Images or Other Identifying Information in Annex E if relevant.

General Informed Consent Form for Participation in Events, Including Media Engagements (SAMPLE)

Purpose

The purpose of this consent form is to ensure that you are fully informed about the nature of your participation in [Event Name/Type], and to seek your consent to participate. [*Discuss the purpose of the event with survivor*].

During the event, you will be asked to [*describe the activities participants will engage in, such as discussions, workshops, focus groups, etc.*].

Voluntary participation

Your participation in this event is completely voluntary. You have the right to decline participation or withdraw at any time without any consequences to your current or future involvement with our organization.

Potential Risks: There may be some risks associated with your participation, including [*discuss with survivor any potential risks, such as emotional distress, physical discomfort, etc.*]. We will take all necessary precautions to minimize these risks.

Benefits: Your participation may contribute to [*discuss with survivor the benefits to them and/or the broader community*]. You may also gain [*describe any personal benefits, such as new knowledge, skills, etc.*].

Confidentiality: We are committed to maintaining your privacy. [*Explain what information can be kept confidential, for example in a private meeting, and what information will be made public based on the survivors' preference and the type of event*]. Your identity will not be disclosed without your explicit consent [*in a public event explain whether and how to manage concerns about keeping certain information private, for example if questioned during a panel discussion*].

Compensation

You will / will not receive [describe any compensation, such as travel reimbursements, stipends, or none if applicable] for their time and effort.

Right to withdraw consent

You may change your mind and withdraw your consent at any time. To withdraw, please contact us through the information below. Withdrawal of consent will not affect access to current or future services provided by our organization.

Storage and security of information

All materials related to your participation will be stored securely and will be accessible only to authorized staff. We are committed to protecting your privacy. We will request that staff remove images from personal phones or other devices.

Contact information:

If you have any questions or concerns about your participation or how your information will be used, please do not hesitate to contact us at:

Name: _____

Email: _____

Phone: _____

Agreement:

I have read the above information and understand the purposes and conditions under which my participation and any related identifying information will be used. I am aware of the potential long-term consequences of my participation. By signing below, I agree to participate in the event as described.

Signature: _____

Print Name: _____

Date: _____