

Informed Consent Form A

Title of the study: GRAFITI-study: research in the growth of Aggressive Fibromatosis

METC nr: MEC-2014-124

I have read the information letter for study subjects. I was able to ask additional questions. My questions have been answered satisfactorily. I have had enough time to consider my participation.

I know that participation is completely voluntarily. I know that I can decide to withdraw from the study at any time. I do not have to explain why I withdraw

I know that some people have insight in my personal data. These people are named in the General Leaflet.

I give permission to the use of my personal data, for the goals that are described in the information letter.

I give permission to the conservation of my research data until 15 years after cessation of this study. It is allowed to keep this document together with my research data in the Erasmus Medical Center, the coordinating hospital of this study.

I would like to participate in this study.

Name:

Signature:

Date: __/__/__

.....

I hereby declare that I have informed this study subject regarding the named study completely.

If during the study period information is revealed, that might affect the permission of the study subject, I will inform the study subject timely.

Name Researcher (or its representative):

Signature:

Date: __/__/__

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Additional information is given by (if applicable):

Name:

Function:

Signature:

Date: __/__/__

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