

Declaration of Consent

Name of the participant in block letters:

Date of birth:

I agree to participate in the study "Bipedal locomotion and pelvic girdle architecture".

Dr Katya Stansfield provided me with clear and detailed information about the objectives, significance, and scope of the study as well as about the requirements resulting from my participation in the study. In addition, I have read this information text for participants and the declaration of consent, especially section 4 (regarding risks, discomforts, or side effects). The study coordinator answered all my questions sufficiently and in a comprehensible manner. I had enough time to decide whether I would like to participate in this study. At the moment, I have no further questions.

I will follow the instructions that are necessary for conducting this study. However, I reserve the right to end my voluntary participation at any time, without this being to my disadvantage. If I want to withdraw from the study, I can do so at any time by contacting **Dr Katya Stansfield**, either in writing or verbally.

At the same time, I agree that my data collected in this study are recorded and analysed. I agree that my data are permanently saved electronically in *pseudonymized* form. The data are saved in a form that is only accessible to the project management and are secured according to current standards.

If I want my data to be deleted later, I can arrange for it by contacting **Dr Katya Stansfield** either in writing or via telephone, and without having to give a reason.

I have read and understood the information for participants. In the explanatory meeting, I had the opportunity to ask all the questions I was interested in. My questions were answered fully and in a comprehensible manner.

I have received a copy of this information for participants and declaration of consent. The original remains with the study coordinator.

Date.....

Signature of the participant

Date.....

Name and signature of the study coordinator