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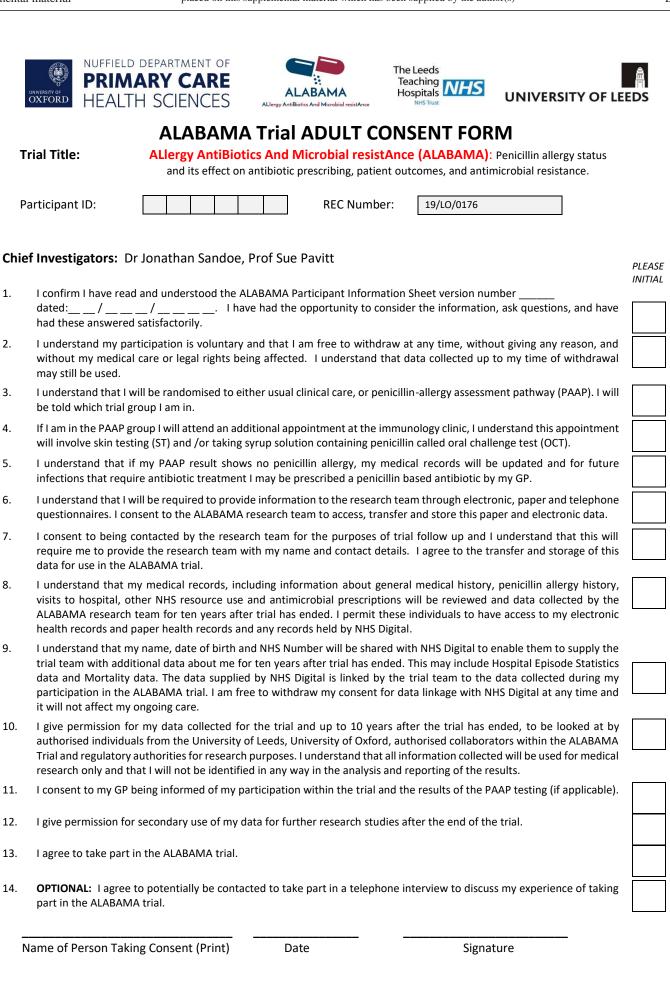
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Name of Participant (Print) Date Signature IRAS Number: 252976 ALABAMA Consent Form V3.0 15 Jan 2021 When completed, store top copy in Site File & scan into Medical Notes; give bottom copy to participant.