

SERIAL NUMBER; / / / / /

CONSENT FORM

I agree to be interviewed as part of the WEST OF SCOTLAND
TWENTY-07 STUDY and to having the following simple
physical measures taken:

height, weight, resting pulse rate, blood pressure,
respiratory function and reaction times.

I understand that I do not need to answer all of the
questions if I do not wish to do so, and that any
information that I provide will be treated in the
strictest confidence.

Name: (block capitals) _____

signed; _____

date; _____