

## Online Participant Information

### **Project title**

Prosopagnosia Register

### **Name of Researchers**

Associate Professor Romina Palermo, School of Psychological Science, The University of Western Australia, manages the Prosopagnosia Register.

### **Invitation**

You are invited to register with the Australian Prosopagnosia Register.

If you decide to register, your name will be added to a list of potential participants that may be asked to take part in future studies. Please note that by registering you are not obliged to participate in any research projects. For each particular study that we ask you to take part in, you will be sent an information sheet with detailed information on what the study involves (i.e., what you have to do in the study, how long it would take, where you have to go to take part, and whether there are any benefits for you, such as payments to reimburse your travel expenses). This means that over the course of the next few years we may send you information about three different studies, but that you may choose to take part in only one (or none!) of the studies, after you have read what is required in each one.

### **Aim of the Study**

Our research aims to understand the perceptual, cognitive, neural and genetic factors that underlie 'face blindness', or congenital/developmental prosopagnosia.

This register is for people who feel like they have difficulty recognizing other people via their face, and would like to register to potentially be invited to participate in future research projects.

### **What does participation involve?**

Participation in the register involves providing some contact details and basic demographic information, and answering some questions to help us understand more about your face recognition abilities. All of the questions can be viewed below.

### **Voluntary Participation and Withdrawal from the Study**

Participation in this project is entirely voluntary. If you decide to participate, you are free to withdraw from the register at any time without having to give a reason and without consequence. Your data will be destroyed when you withdraw unless you agree that the data collected prior to withdrawal can be used.

### **Your privacy**

All information is treated as strictly confidential. The only exception to this principle of confidentiality is if documents are required by law. Downloaded data will be encrypted and any printed information stored in locked filing cabinets.

### **Possible Benefits**

The research connected with the register will help us answer fundamental questions about how people recognise faces, and why some people find it more difficult. Every few years we send out a newsletter about our research to people on the register, and you might find this interesting.

### **Possible Risks and Risk Management Plan**

There are no known risks associated with joining the Register.

## **Contacts**

If you would like to participate or discuss any aspect of this study, please feel free to contact Associate Professor Romina Palermo on +61 (0) 8 6488 3256 or [romina.palermo@uwa.edu.au](mailto:romina.palermo@uwa.edu.au).

*Approval to conduct this research has been provided by the University of Western Australia, in accordance with its ethics review and approval procedures. Any person considering participation in this research project, or agreeing to participate, may raise any questions or issues with the researchers at any time.*

*In addition, any person not satisfied with the response of researchers may raise ethics issues or concerns, and may make any complaints about this research project by contacting the Human Ethics office at UWA on (08) 6488 4703 or by emailing to [humanethics@uwa.edu.au](mailto:humanethics@uwa.edu.au).*

*All research participants are entitled to retain a copy of any Participant Information Form and/or Participant Consent Form relating to this research project.*

## **Consent Statement**

I have read the information provided and any questions I have asked have been answered to my satisfaction. I agree to participate in this register, realizing that I may withdraw at any time during the study without reason and without prejudice.

I understand that all identifiable information that I provide is treated as confidential and will not be released by the investigator in any form that may identify me unless I have consented to this. The only exception to this principle of confidentiality is if this information is required by law to be released.

\* I consent to participate in this research project Yes  No   
(If they respond 'No' exit the survey)

\* I am aged over 18, or I am under the age of 18 and have approval from my parents/guardian to complete this form.