



## **Informed Consent/Assent Form**

**Dear Camp Morilla Participant and Caregiver,**

**Important Notice: Please read this consent document before proceeding**

**Purpose:** Camp Morilla is collecting information on participants for organizational, research, and evaluation purposes. Through this effort, we hope to continuously improve the Camp Morilla program. By proceeding and signing the bottom of this page, you have agreed to participate. This program evaluation is being conducted by WestCare Kentucky to fulfill grant requirements for the Kentucky Opioid Abatement Advisory Commission (KYOAAC) through the Kentucky Office of the Attorney General. We appreciate your participation.

**Description of Procedures:** Participants who return this signed informed consent/assent form will be asked to complete a Camp Morilla Youth Questionnaire (attached) at the conclusion of each day camp. The Camp Morilla Youth Questionnaire includes items regarding family history, substance use, juvenile justice involvement, peer relationships, mentor relationships, education, and quality of life. For caregivers attending the evidence-based parenting education program, a Camp Morilla Caregiver Satisfaction Survey will be distributed at the conclusion of the curriculum.

**Risks:** The Camp Morilla Youth Questionnaire include items regarding family history, substance use, juvenile justice involvement, peer relationships, mentor relationships, education, and quality of life. If these topics make you uncomfortable or you do not care to answer, you may choose not to answer. The collection of this information and the subsequent evaluation process poses minimal risk as WestCare Kentucky ensures confidentiality of your information.

**Right to Privacy:** All forms and materials will be maintained by Camp Morilla staff and any data shared for research or evaluation purposes will be made anonymous to protect participant confidentiality. The results of any research or evaluation may be released to WestCare Kentucky management, the KYOAAC, and the Kentucky Office of the Attorney General. If the results of any study are shared or published, the privacy of camp participants and their families will be protected, and they will not be identified in any way.

**Right to Participate or Withdraw:** This notice is distributed to all Camp Morilla participants and their caregivers (e.g., parents, grandparents, legal guardians). Participation is completely voluntary, and you may request to withdraw consent, choose not to answer any question on our

forms, and/or ask questions at any time. There is currently no incentive for participating other than knowing you are helping us develop our program to help future participants and their families.

**Assent and Consent:** Below, we request the assent of Camp Morilla participants and the consent of their caregivers. Your signatures mean that you have read this form in its entirety, comprehend the consent, and are willing to participate in sharing your information for program evaluation and research purposes.

**Parent/Guardian/Caregiver printed name for consent:** \_\_\_\_\_

**Parent/Guardian/Caregiver signature for consent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed name of Participant for assent:** \_\_\_\_\_

**Signature of Participant for assent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Thank you for your time and consideration in this matter.

Sincerely,

The Camp Morilla Team

For any questions about this form or the research/evaluation project, please contact: Keith A. Edmonds, PhD, Director of Research and Evaluation [keith.edmonds@westcare.com](mailto:keith.edmonds@westcare.com) or 567-408-8291.