

Version number & date: 2nd 19/06/2025

Research ethics approval number: 16472

Title of the research project: Game Over: A Re-Evaluation of Physical Social Gaming Spaces

Name of researcher: Christopher McMahon

Please initial box

1. I confirm that I have read and have understood the information sheet dated [DATE] for the above study [or it has been read to me]. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily. ☐
2. I understand that taking part in the study involves taking part in social playing of a videogame whilst being observed by researchers. I can make comments if I wish and all comments will be completely anonymous. ☐
3. I understand that my participation is voluntary and that I am free to stop taking part and can withdraw from the study at any time without giving any reason and without my rights being affected. In addition, I understand that I am free to decline to answer any particular question or questions, but I understand that researchers will not speak to me unless I speak to them first. ☐
4. I understand that I can ask for access to the information I provide, and I can request the destruction of that information if I wish at any time prior to 1 month after the event. I understand that following 15/08/25 I will no longer be able to request access to or withdrawal of the information I provide. The only information I provide that will be recorded is verbal comments that I consent to being recorded within written notes. I understand that quotes I provide may be used in research outputs and they will be fully anonymised. ☐
5. I understand that the information I provide will be held securely and in line with data protection requirements at the University of Liverpool, being fully anonymised and then deposited in the secure University server when research notes are written up for use by the researcher and research assistant. ☐
6. I understand that signed consent forms will be retained on a secure university server until the end of the study in September 2026. ☐
7. I agree to take part in the above study. ☐

I declare that I have provided accurate identity details for the purpose of attending the research event at Pixel Liverpool

I agree that my information can be quoted in research outputs such as conference papers and journal articles

Participant name

Date

Signature

Name of person taking consent

Date

Signature

Principal Investigator

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Accessibility: To request this document in an alternative format, please contact the Principal Investigator listed above.

