

CB010 - Cancer Biobank Withdrawal of Consent Form



NUI Galway
O'É Gaillimh

Biobank: Lambe Institute, National University of Ireland, Galway

Data Controller: Saolta (HSE) Cancer Managed Clinical and Academic Network

Governance: Director of Cancer Biobank

I hereby wish to withdraw my consent to participate in the Cancer Biobank and understand that such withdrawal WILL NOT jeopardise any of my clinical care.

Please tick one of the following options:

- “No further **access**”: This means that the Biobank would not access your medical records any further, but would still have your permission to use your data and samples already provided.
- “No further **use**”: This means your data and samples collected could no longer be used for research. Your samples and data would be destroyed. Your signed consent and withdrawal form would be kept as a record of your wishes.

Participants Name: <i>(Please Print)</i>		D.O.B:
Signature:		Date: