WRITTEN CONSENT for Participants

**Analysis and Visualisation of Complex Familial Relationships in Greek Mythology**

I have read and understood the Information Sheet you have given me about the research project, and I have had any questions and concerns about the project (listed here

)  
addressed to my satisfaction.

I agree to participate in the project. YES ☐ NO

I agree to this interview being audio-recorded YES ☐ NO

I agree to this interview being video-recorded YES ☐ NO

I agree to be identified in the following way within research outputs:

Full name YES ☐ NO

Pseudonym YES ☐ NO

No attribution YES ☐ NO

Signature:…………………………………………….

Date:………………………………………………….