



For a patient's consent to publication of information about them in the Journal of the ASEAN Federation of Endocrine Societies (JAFES).

Name of person described in article or shown in photograph:  Subject matter of photograph or article:	
JAFES manu	et matter of the photograph or article is hereafter termed as the "INFORMATION.") script number:  ::
Corresponding author:	
I,	, give my consent for this information [please insert your full name]
about MYSE	LF/MY CHILD OR WARD/MY RELATIVE relating to the subject matte [please encircle correct description]
above to app	ear in the Journal of the ASEAN Federation of Endocrine Societies (JAFES
subject to its	publication policies and ethical standards.
	nd read the material to be submitted to the JAFES and thoroughly understand th
all attempts,	tion will be published in the JAFES without my name. It is the obligation of the JAFES to mak within its reasonable jurisdiction and authority, to ensure my anonymity. tion may also be placed on the JAFES' website.
• The JAFES	shall not allow the Information to be used for advertising or packaging or to be used out o used to accompany an entirely different article or topic).
• I can withdr	aw my consent at any time before publication, but once the Information has already been sent to understanding that it will not be possible to revoke the consent.
Signed:	Date:
	[signature over complete name]
Witness:	
Signed:	Date:
	[signature over complete name]

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