

>>DATE<<

>>Participant's Name<<

>>Participant's Address<<

Dear >>Participant's Name<<,

Enclosed please find the documents for the Accelerated Cure Project for Multiple Sclerosis study about which we spoke. I have enclosed an Informed Consent Form and Case Report Form for your review.

Please review the consent form carefully. By signing this consent form, you are agreeing to participate in the above-mentioned study. During your first visit, we will review this consent form with you and answer any questions or concerns you may have about this study. Therefore, we are asking that you do not sign this consent form until your first visit. Once your questions have been answered and you decide to participate, you will be asked to sign and date this consent form. You will also be given a copy of your signed consent form to take home

It is also important to review the Case Report Form. Many of the questions may require some research on your part, which is why we send them out in advance. Feel free to mark it up and write down any questions you have. During your appointment, I will complete a fresh one with each of you to be sure we have all the information we need.

Thank you for your consideration of this important research. Though it may take a few hours of your time, the information you provide could help scientists develop new treatments and ultimately a cure for MS and other demyelinating diseases.

When you come for your appointment, < insert site specific instructions as to where to park, how to find clinic>.

If you have any questions, please call me at < phone number >.

Warmest Regards,

< Study Coordinator Name>

<Site Information>