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Oral History Gift Agreement

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- a preservation master copy and user copies of the recording
- reformatted copies of the recording that meet changing technological and archival standards
- an edited transcript and summary
- a photograph of me from the interview
- copies of any personal documents or additional photos I wish to share during the interview

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

[ENTER PARTICIPANT NAME BELOW]

I, _____

do hereby grant, convey, and transfer to James Madison University Libraries Special Collections the recordings, transcripts, and any related materials of my oral history collection / interview(s) conducted on the following date(s):

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I acknowledge that a recording and/or transcript of my interview will be permanently housed in JMU Libraries Special Collections and will be made available and used in accordance with the JMU Libraries mission:

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Participant's Signature

Date