



Fremont Stories Oral History Project

Gift and Release Form (For Oral Histories)

We _____
Interviewee (please print)

and

Interviewer (please print)

do hereby give and grant to The Museum of Local History all literary and property rights, title and interest which we may possess to the video recordings and transcript(s), of the interview(s) conducted at:

On the date(s) of _____

For the Museum archives and use, which gift we will never revoke or recall.

I authorize the Museum of Local History and Celebrate Fremont to use the recordings, photographs and video and/or audio clips in such a manner, including but not limited to presentations and distribution, as may best serve the educational and historical objectives of the Celebrate Fremont funded, Fremont Stories project.

In making this gift, I voluntarily, and without seeking compensation, convey ownership of the video recordings, including any related photographs to the Museum of Local History, 190 Anza St., P.O. Box 3078, Fremont, Ca. 94539

Interviewee's Signature:	
Address:	
Telephone:	Cell phone:
Email:	Date:

Interviewer's Signature:	
Address:	
Telephone:	Cell phone:
Email:	Date: