

## **Oral History Project** Deed of Gift Agreement

## AUTHORIZATION AND UNDERTAKING IN RELATION TO THE DEPOSIT OF ORAL RECORDINGS AND TRANSCRIPTS IN THE ETOWAH VALLEY HISTORICAL SOCIETY, P.O. BOX 1886, CARTERSVILLE, GEORGIA 30120

Interviewee:
Location Address:
Phone Number:
Interviewer:
Title of Oral History
Short description:
Date of recording:, Number of DVD's requested:
The Etowah Valley Historical Society is attempting to preserve history by means of audio, video or a combination of the two media. Recordings and their reproductions become a part of the grahiyes of the Etowah Valley Historical Society. This material will

become a part of the archives of the Etowah Valley Historical Society. This material will be made available for historical and other academic research by scholars and may be resold for educational and entertainment purposes. All rights, title, and interest in any reproduction, which may subsequently be made from these original productions, will be assigned to the Etowah Valley Historical Society.

I am willing that a tape of this recording shall be deposited in the Etowah Valley Historical Society subject to such conditions as I impose during my lifetime and held by it in perpetuity and that the Etowah Valley Historical Society may make a transcript of the recording.

I understand that copies of oral recordings and transcripts will be placed in other libraries and repositories for use by the public. These recordings and transcripts will be placed in other locations at the discretion of the Etowah Valley Historical Society and will be subject to all stated restrictions.

the historical research interview. In whereby permit the Etowah Valley Historications named below placed on its contractions of the contractions o	ily offer the information contained as transcribed on view of the scholarly value of this research material, I storical Society to use and distribute it with any its use.  Its use.  Its use write NONE across redings below: (if no restrictions write NONE across)
	Interviewee
-	Interviewee
-	Date
,	Interviewer
	EVHS Liaison