



ORAL AND VIDEO HISTORY INTERVIEW RELEASE FORM
Marist College Archives and Special Collections

My signature below confirms my agreement with the Marist College Archives and Special Collections, regarding the disposition of audio/video interviews conducted with me,

_____, on (date) _____, by _____,

for (project) _____.

I understand that the recordings and transcripts (if transcribed) of the interview(s) will be maintained and made available by the Marist College Archives and Special Collections for such research, production (i.e. – radio, television, World Wide Web), and educational purposes as the College shall determine.

I hereby grant, and transfer to Marist College all rights, title, and interest in the interview, including the literary rights and the copyright. I shall retain the right to copy, use, and publish from the interview in part or full during my lifetime.

I attest that I have voluntarily agreed to be interviewed and that this document contains the entire and complete agreement concerning the use and preservation of my interview.

Signature of Interviewee: _____ Date: _____

Name (printed): _____

Address: _____

Phone #: _____

Signature of Interviewer: _____ Date: _____

Name (printed): _____

If you have any questions concerning your rights as in interviewee, contact the Marist College Archives and Special Collections, 845-575-2750.