

QUEENS MEMORY
Informed Consent and Copyright Permission
For Oral History Interviews, Images, and Personal Documents

Participant's Name: _____

Mailing Address: _____

Phone: _____ **Email:** _____

I am at least eighteen years of age (if under the age of eighteen, consent must be signed by parent) and I voluntarily agree to share my interviews, images, and personal documents with Queens Memory, a program developed and maintained by the Queens Borough Public Library and Queens College of the City University of New York., to document life in the borough of Queens, New York.

I understand that the following items may be created from an interview I share:

- an audio and/or video recording;
- an edited transcript and summary;
- edited audio/video clips;
- a photograph of me;
- copies of any personal documents or additional photos that I wish to share

I understand that my interview (and other items listed above) may be distributed to the public for educational purposes, including formats such as print, public programming, and the Internet.

I agree to freely share my interview (and other items listed above) under the terms of a Creative Commons Attribution-NonCommercial-ShareAlike 3.0 Unported License. This means that I retain the copyright to my material, but the public may freely copy, modify, and share these items for noncommercial purposes under the same terms, if they include the original source information.

Further, I agree to hold the Queens Borough Public Library, its affiliates and branches harmless against any claim, action, loss, damage or alleged infringement of any copyright, trademark, or other third party property rights, caused by or arising from the publication, exhibition or telecast of my interview, audio and/or video recordings, photograph or copy of my personal documents furnished to the Queens Borough Public Library as part of the Queens Memory program.

I understand that I shall receive no compensation for the material I share. In return, Queens Memory agrees to send one free copy of the interview recording, transcript, and related items to me at my address above.

Any exceptions to this agreement [such as a request for anonymity] must be listed below:

Permission granted:

Participant's Signature

Date

Parent's Signature

Date

Interviewer's Signature

Date

Questions?

Contact Queens Memory Director, Natalie Milbrodt, 718-990-0837; Natalie.Milbrodt@queenslibrary.org

Reminder: Sign TWO copies: one stays with the participant, and the other returns to Queens Library.