

TRIM Reference: _____



ORAL HISTORY INTERVIEWS – CONSENT FORM

Name of Interviewee: _____

Address: _____

Phone Number: _____

Email Address: _____

Interview recorded by: _____

I understand that copyright of this oral interview remains with myself.

However, I hereby give my permission for the City of Greater Geraldton to copy, store in the Local History Collection, loan, publish (including electronic publication), transmit and use the recording/transcription of the interview and any photographs I provide for research and interpretation purposes. I agree that I will not seek fees or compensation for using my oral history material for these purposes.

I am aware that the interviews/photos may become a part of the State Library of Western Australia Oral History Collection.

I understand that I will receive a copy of the recording of the interview and a copy of any transcript that is made.

Any special conditions as stated by the Interviewee?

1. No _____

2. Yes *please specify* _____

Signature of person interviewed: _____

Signature of
Interviewer: _____

Date: _____