Oral History Agreement

Community members representing the Butler Center for Arkansas Studies will record research interviews with persons having special information about the past. These interview recordings, and any transcripts or other versions of the interviews that might be created, may become part of the archives of the Butler Center and may be placed in other archival facilities according to the wishes of interviewees and of the Butler Center. Such material will be made available for historical and other research and for public presentation by such means as books, media productions, museum exhibitions, and website presentations, subject to any restrictions the interviewee may wish to place on access to the materials. The Butler Center will honor such restrictions to the fullest extent allowable by law. Participation in Butler Center oral history research projects is entirely voluntary. Interviewees can withdraw from interview projects at any time. Any restrictions by the interviewee on use of material are designated below.

CONSENT

I have read the above and give my consent for recordings of interviews with me and any possible transcripts or other representations of those interviews to be used for the purposes set out above. I hereby assign my rights, title, and interest, including copyright, pertaining to interviews with me to the Central Arkansas Library System, subject to the following restrictions:

Restrictions:

________________________________________________________________________ _______________________
Interviewee (signature) Date

________________________________________________________________________
Name of Interviewee (Please print)

________________________________________________________________________ _______________________
Email Address of Interviewee Phone Number (with area code)

INTERVIEWER AGREEMENT

I hereby assign to the Central Arkansas Library System all rights, title, and interest, including copyright, to my portion of recorded interviews I have conducted for the Butler Center for Arkansas Studies.

________________________________________________________________________ _______________________
Interviewer (signature) Date

________________________
Name of Interviewer (Please print)