



BROOKLYN
HISTORICAL
SOCIETY



CROSSING
BORDERS,
BRIDGING
GENERATIONS

INTERVIEW AGREEMENT FORM PART I

By signing this form, you give BHS permission to archive and preserve your oral history interview in the BHS Library and make it available to researchers. You will approve present-day use of the interview in Part II of the Agreement, after you have reviewed the interview.

Date of Interview: _____ **Interviewer Name:** _____

Name of Person Interviewed: _____

Address: _____

Phone: _____ **Email:** _____

Date of Birth: _____ **Occupation:** _____

In consideration of the recording of my interview, I, _____, consent to the recording and use of my statements, voice, image, and name in connection with the interview (collectively the "Interview"), and I grant equally and wholly to the Brooklyn Historical Society as well as its assigns, licensees, and successors (collectively "BHS") a nonexclusive license to separately or jointly publish, use, and sublicense all or any portion of the Interview, photographs, videotapes, and/or sound recordings BHS has taken or made of me on this date or in which I may be included for use in publicity, advertising, research, websites, publications, exhibitions, broadcasting, reproductions in existing and future media formats or for any other lawful purpose in conjunction with my own or a fictitious name throughout the world and in perpetuity.

By granting BHS the above nonexclusive license, I do not give up any copyrights that I may hold in the Interview nor obligate BHS to use the rights granted.

I waive all claims for any compensation for such use and release BHS from all claims that I could assert in connection with use of the Interview. These claims include but are not limited to defamation, violations of the right of privacy or the right of publicity, copyright infringement, and include liabilities, damages, and expenses.

I have read the above consent, grant, and release prior to its execution and am fully familiar with and understand the above terms.

I agree to the terms described above.

Signature

Signature of Parent/Guardian
(if person interviewed is under 18)

Date

Date

INTERVIEW AGREEMENT FORM PART II
Crossing Borders, Bridging Generations Website Use

After you have taken the time to review the transcript and audio/video of your interview, please indicate (yes or no) **and** initial if you are comfortable with BHS using your interview (or photograph) in any of the following ways:

Initials

YES or NO	_____	Access to full interview via Online Archive
YES or NO	_____	Clips of Audio/Video Interview posted on the BHS Website or Blog.
YES or NO	_____	Clips of Audio/Video Interview featured on BHS Podcast
YES or NO	_____	Clips of Audio/Video Interview played during a Live Event.
YES or NO	_____	Photograph posted on BHS Website or Blog
YES or NO	_____	Photograph used in BHS print materials

Please contact us directly if you have any questions or would like to discuss anything about your interview or this release form:

Sady Sullivan, Co-director, *Crossing Borders, Bridging Generations*: ssullivan@brooklynhistory.org

718.222.4111 x233