

Hurricanes Research Project

Interviewee's Permission and Release

Dear _____,

You are being asked for an interview for the purpose of recording your stories about Hurricanes Katrina and/or Rita. This voluntary interview is part of a larger project documenting the history of these hurricanes. The project purpose is to document (1) hurricane effects on individuals and (2) their memories of pre-hurricane ways of life, neighborhoods, and sense of place and to understand what lessons can be learned from people's experiences. Oral histories are being collected by researchers throughout the nation from people of all walks of life and all ranges of experience and will continue to be collected on an on-going basis. This project may not provide any direct gain, but you may benefit from the opportunity to share your experiences and contribute to the collection of information about one of the greatest natural disasters ever to hit our nation. Most likely this interview will take two hours or less of your time. Information from your interview will be put in a searchable database that will be publicly available through the Internet. Copies of the interview and data forms will be co-deposited in permanent collections at the Library of Congress American Folklife Center and in a Gulf-coast regional archive. You have the right to a copy of the finished interview. You have a right to stop the recording or the interview at any time or to restrict usage of parts of your interview; please list any restrictions:

(continue on reverse).

By signing this permission and release form below, you grant ownership of the physical property of this interview to the interviewer, the Library of Congress, and the regional archive. You give them the right to use the property that is the product of your participation, including your interview, photographs of you or provided by you, and any submitted written materials. These products may used, published, and copied by the Library of Congress, its assignees, the interviewer, and the regional co-depository in any medium, including exhibition, publication, presentation on the Internet and successor technologies. Permission to use your name, voice and image reproduction, and interview statements and documents do not require further approval on your part. In signing this release, you also release the co-depositories and assignees from all claims in connection with the use of these products, including any claims for defamation, invasion of privacy, or right of publicity. In giving permission, you do **not** give up any copyright or performance rights. In other words, you also have the right to use or publish this material. If you have questions about this interviewing project, you can contact:

Interviewer's name	Institutional/Organizational affiliation	Phone number	2 nd Phone number
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If you have questions about the interview, database, or archiving, you can contact:

I HAVE READ THE PERMISSION AND RELEASE LETTER ABOVE AND ACCEPT AND AGREE TO ITS TERMS:

Signature _____ Date _____

Printed Name _____

Address _____

City _____ State _____ ZIP _____ - _____

Phones (_____) - _____ ; (_____) - _____ E-mail _____