

Oral History Gift and Release Agreement

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In consideration of the role of the Archives in preserving and making your recording available, we ask you to agree to the following:

I, Sarah A. Lester ^{for Mike Lester}, transfer to the University of Alaska Fairbanks' Rasmuson Library my title, interest, and copyright to the recording.

I also agree not to hold the University of Alaska Fairbanks liable for how it makes the recordings available and how it preserves them. I further acknowledge that I have been informed of the following:

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- The Library may make this recording electronically accessible via local area networks, the Internet, or other electronic means for access and preservation purposes.
- While the Library only intends to make the recordings available for educational and/or non-commercial purposes, by signing this form I release the Library and the University from liability in cases where individuals who access a recording might violate these conditions.

Please be assured that we will do all that we can to inform users of these conditions and thereby minimize the potential for misuse. **None of the above mentioned conditions restricts you from re-telling and/or recording again any of the information you gave on this recording.**

Sarah A. Lester
(Narrator's printed name)

(Date)

18256 Ithica Dr., Park Rapids, MN 56470
Interviewer's (Narrator's printed mailing address)

(Narrator's signature)

X Sarah A. Lester Sarah A. Lester
(Interviewer's printed name & signature)
For Mike Lester

X Feb 23 - 2005
(Date)

(Collection manager's signature)

Robyn L. Russell

Form revised on 1/24/02

3-02-05