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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:

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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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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.**

Joe Herbert
(Narrator's printed name)

Box 22 Chalkyitsik
(Narrator's printed mailing address)

Joe L. Herbert
(Narrator's signature)

Willie Salmon 9/9/09
(Date)

Willie Salmon
P.O. Box 4
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(Interviewer's signature)

(Date)

(Collection manager's signature)

Form revised on 1/24/02

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