

ORAL HISTORY (907) 474-7261

2014-02-20

UNIVERSITY OF ALASKA FAIRBANKS

2014-02-19

The Elmer E. Rasmuson Library  
Fairbanks, Alaska 99775-1005

PT. 1-2

ORAL HISTORY

GIFT AND RELEASE AGREEMENT

I, EVA WRIGHT of  
name

P.O. Box 157, WARDEN  
street or P.O. box number

WA 98857  
city state zip

transfer to the University of Alaska Rasmuson Library my title, interest, and  
copyright to the interviews recorded with me on July 15, 1999.  
month/day yr.  
According to its policies, Rasmuson Library makes oral history recordings  
available to researchers, writers, scholars, and the interested public

Eva Wright  
signature

July 15, 1999  
date

1631

APR Accession

Register: 2014-0012

ORAL HISTORY

2014-02-19 PT. 2

2014-02-20  
2014-02-21  
(907) 474-6773



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**Elmer E. Rasmuson Library  
Alaska and Polar Regions Collections & Archives**

310 Tanana Loop Room 211, P.O. Box 756808, Fairbanks, Alaska 99775-6808

**Oral History Gift and Release Agreement**

Thank you for your generous contribution of knowledge to the Oral History Archives. We welcome the opportunity to have the audio recording made with you on 7/15/99. The Oral History Archives agrees to preserve your recording and make it available to the public.

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

I, Eva Wright, transfer and convey to the University of Alaska Fairbanks' Rasmuson Library any of my title, interest, and copyright, if any, to the recording.

I also agree to hold the University of Alaska Fairbanks harmless for how it makes the recordings available and how it preserves them. I further acknowledge that I have been informed of the following:

- The Oral History Program makes recordings available to researchers, writers, scholars, students, and the interested public.
- 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.



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**None of the above mentioned conditions restricts you from re-telling and/or recording again any of the information you gave on this recording.**

I have read and accept both the terms of the Oral History Gift and Release agreement as well as the Interview Restrictions provided.

Eva Wright  
(Narrator's printed name)

x Eva Wright  
(Narrator's signature & date)

c/o Roland and Mary Hansen,  
10619 Handicap Dr. S. E., Warden, WA 98857  
(Narrator's mailing address)

Eva Wright 12/16/13  
(Interviewer's signature & date)

Robyn L. Russell 1-06-14  
(Collection manager's signature & date)

Names of other institutions where copies of this recording (s) are deposited:

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