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ORAL HISTORY  
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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, Chelsea Walker, transfer and convey to the University of Alaska Fairbanks' Rasmuson Library 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:

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

Chelsea Walker  
(Narrator's printed name)

Chelsea L Walker 9/1/2017  
(Narrator's signature & date)

949 McSawin St. Apt 1A  
Fairbanks, AK 99701  
(Narrator's mailing address)

Wynne L. Howard 9/1/2017  
(Interviewer's signature & date)

Robyn L. Russell 9/18/17  
(Collection manager's signature & date)

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

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