

Tape No. ORAL HISTORY 97-66-16



(907) 474-6773
FAX (907) 474-6365
fyapr@uaf.edu
www.uaf.edu/library

**Rasmuson Library and Information Technology
Alaska and Polar Regions Collections**

Room 211 Elmer E. Rasmuson Library, 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 **your grandfather, Harry O. Arend on 10/28/64.** 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, **Rebecca Arend Knott,** 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:

- 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.



(907) 474-6773
FAX (907) 474-6365
fyapr@uaf.edu
www.uaf.edu/library

**Rasmuson Library and Information Technology
Alaska and Polar Regions Collections**

Room 211 Elmer E. Rasmuson Library, P.O. Box 756808, Fairbanks, Alaska, 99775-6808

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.**

I have read and accept both the terms of the Oral History Gift and Release agreement as well as the Interview Restrictions listed on the reverse side of this document.

Beki Arend Knott
(Narrator's printed name)

Beki Arend Knott
(Narrator's signature & date)

604 Park Lane; Corona, California, 92879

(Narrator's mailing address)

Moby L. Russell 4-09-13
(Collection manager's signature & date)