

# Utah State UNIVERSITY

Special Collections & Archives!

3000 Old Main Hill

Logan UT 84322-3000

Telephone: (435) 797-2663 \* FAX (435) 797-2880

I, Dustin, (informant) contribute my interview or folklore item(s) with Alexis Robb, (collector) to Utah State University Library's Special Collections & Archives (hereinafter "SCA"). We (informant and collector) understand that the materials that SCA acquires are preserved and made available for scholarly and educational purposes and may be duplicated by/for SCA or affiliates (USU students & faculty, researchers, community members). We understand that SCA plans to retain the product of my participation as part of its permanent collection and that the materials may be used for exhibition, publication, promotion, and presentation on the World Wide Web (internet) or successor technology.

I (informant) grant to SCA ownership of the physical property of my participation (cassette tape(s), CD, transcript, wave file, MP3 format, photograph(s), video, etc.) delivered to SCA and the right to use the property that is the product of my participation (for example, my interview, performance, photographs, and written materials) as stated above. By giving permission, I understand that I do not give up any copyright or performance rights that I hold.

I also grant to SCA my consent for the use of my name, any photograph(s) or video, performances, sound effects, and voice reproduction provided by me or taken of me in the course of my participation in the interview to be used, published, and copied by SCA and its affiliates, unless noted, without further approval on my part.

We (informant and collector) release SCA, and its affiliates, from any and all claims and demands arising out of or in connection with the use of such recordings, documents, and artifacts, including but not limited to, any claims for defamation, invasion of privacy, or right of privacy.

## ACCEPTED and AGREED

*(Note: Whether you electronically type your name in the signature space below or print this form and sign by hand, you are appending your signature to this document and agreeing to the above conditions.)*

Participant Signature Dustin Luthi Date 12/2/17

Printed Name of Participant Dustin Luthi 12/2/17

Parent/Guardian Signature  
(if participant is a minor)

Date \_\_\_\_\_

Printed Name of Parent/Guardian

Interviewer Signature Alexis Robb Date 12/2/17

Printed Name of Interviewer \_\_\_\_\_  
Alexis Robb

Participant Address 80 E center street, Hyde park  
\_\_\_\_\_

City: Hyde Park State: Utah Postal Code 84318 \_\_\_\_\_

Participant Telephone: (435) 994-0797 E-mail: luthmyster1987@hotmail.com \_\_\_\_\_

Restrictions: \_\_\_\_\_  
\_\_\_\_\_