



ORAL HISTORY CONSENT FORM

I hereby declare that I consent to participate in the Help Us Make History Oral History Project being conducted by students from either the Waterloo Region District School Board, Waterloo Catholic District School Board, private school, or homeschool group.

The purpose of this project is to collect and preserve life stories from individuals who have been affected by the COVID-19 pandemic. The oral histories will be preserved at the Ken Seiling Waterloo Region Museum, and will be made available to researchers and the public. By signing below, I agree to the following:

1. I understand that the interview may be audio or video taped and that I may be identified by name. I may also be identified by name in any transcript (whether verbatim or edited) of such interview. See Open Public Access below.

2. I understand that upon completion of the interview, the recording and content of the interview becomes the property of The Regional Municipality of Waterloo (the "Region"), including without limitation all intellectual property rights, moral rights, copyrights or any other rights that may be claimed later. The information contained therein may be used for educational, academic, research and other public purposes at the sole discretion of the Region. Furthermore, this information is collected under, and subject to, the authority of The Regional Municipality of Waterloo Act, R.S.O. 1980, c. 422 (as amended), and legal title of the material will reside with the Department of Planning, Development, and Legislative Services.

3. Any specific restrictions placed upon portions of the recording will be edited out of the final copy of the transcript, as noted below:

If none, please initial here: _____



Public Access

In terms of identification and reproduction of my interview, I agree to (please choose one):

- I consent to the distribution and reproduction of my interview and name through any method or media. I consent to have my interview available either in totality or in part, on the Internet via the Region of Waterloo Museums' websites and/or social media feeds. My interview may be used in any future exhibitions created by the museums.

- I consent that my interview and name be available to researchers and the public strictly for consultation at the Ken Seiling Waterloo Region Museum, but the recording will not be transmitted or reproduced in any other way, neither in part or in its totality.

I have carefully studied the above and understand this agreement. By signing this form:

- I acknowledge that I have read, understood and agree to the above conditions, release, and waiver terms; and

- The Region makes best efforts to comply with the Open Public Access terms but makes no guarantee: and

- I freely and voluntarily agree to participate in this project



Interviewee:

Name (please print): _____

Date: _____

Signature: _____

Name and signature of parent/guardian if interviewee is under age 18:

Interviewer:

Name (please print): _____

Date: _____

Signature: _____

Name and signature of parent/guardian if interviewer is under age 18:

School: _____

Class and Teacher: _____