I, ______am a participant in the Find Fayetteville Initiative project. I understand that the purpose of the project is to collect audio and video recordings and selected related documentary materials (such as photographs, manuscripts) that may be deposited into the permanent collections of Find Fayetteville and/or its partners. The deposited documentary materials may be used for preserving our history, educational purposes, and other purposes.

I understand that my participation in the project is voluntary and that I will not receive any financial compensation for my participation. I agree to allow Find Fayetteville and its partners to use, reproduce, and distribute the recordings and documentary materials for the purposes stated above. I also understand that I have the right to withdraw my consent at any time by notifying Find Fayetteville in writing.

I herby grant Find Fayetteville and/or its partners ownership of the physical property delivered to the institution 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 my permission, I understand that I do not give up any copyright or performance rights that I may hold.

I also grant Find Fayetteville my absolute and irrevocable consent for any photograph(s) provided by me or taken of me during my participation in the project to be used, published, and copied by Find Fayetteville and its assignees in any medium.

I agree that the Find Fayetteville Initiative and/or its partners may use my name, video, or photographic images or likeness, statements, performance, and voice reproduction, or other sound effects without further approval on my part.

I hereby release and discharge Find Fayetteville/ Visit Fayetteville, its officers, directors, employees, and agents from any and all claims, demands, or causes of action that I may have now or in the future arising out of or relating to my participation in the Find Fayetteville Initiative project.

I have read this release form and understand its contents. I voluntarily agree to its terms.

Participant's	Signature:
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Date:_____

Printed Name:

Address

Phone: