



RICHS Image and Item Individual Release

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By signing this form, the Donor acknowledge and understand that the Images and Items will be used by the RICHS of Central Florida project directors and distributors in any media format, publicly or privately.

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Name: _____

Signature: _____

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RICHS Image and Item Individual Release Conditions

Please include as much information as possible.

Description of Materials:

Number of Images: _____

Number of Items: _____

Creator/Publisher: _____

Subject Content of Materials (i.e. African American history in Sanford, Florida): _____

Medium (Are the Images in black and white, or color? Are the Images photonegatives, 3x5" photographs, newspaper articles, correspondence, etc.? What type of Items are there?): _____

Restrictions (check all options that apply):

_____ It is the Donor's wish to make the Images and/or Items immediately available to RICHS, therefore there are no restrictions. This includes displaying the Images on the Central Florida Mosaic Interface (CFMI).

_____ It is the Donor's wish that the Images and/or Items will NOT be displayed and accessed on the CFMI.

Explain: _____

_____ It is the Donor's wish that all Images and/or Items be retained and accessed only after (date) _____
_____.

Explain: _____

_____ Other (explain): _____



Copyright Statement (check one option that applies):

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_____ The Donor accepts the copyright statement created by RICHS and will allow all of the Images and/or Items displayed on the CFMI to contain the above copyright statement.

Name of Donor (no abbreviations): _____

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CFMI Staff Use Only:

Name of CFMI Collection: _____

CFMI Image Identifiers: _____

Date of Acquisition: _____

Staff Name and Initials: _____