



Deed of Gift Oral History

This is to acknowledge with gratitude your generous contribution to the preservation of the history of the Swannanoa Valley by providing your memories in this Oral History.

Name & Address of Interviewee:

Phone: _____ Email: _____

Date of Interview: _____ Location: _____

Permission Granted to Museum

I, _____, hereby grant permission to the Swannanoa Valley Museum to use the information collected herewith in this Oral History, along with photos and/or videotapes, in any way the museum deems appropriate to the fulfillment of its mission of education and the preservation and interpretation of the history of the Swannanoa Valley. The Oral History (or parts of it) may be used, for instance, in compiling an historical book, play, song, film or video, website, or display. The photographs and videos taken or excerpts from the interview may be used for publicity purposes. I understand that the taped and/or transcribed material will be archived at the Swannanoa Valley Museum according to its collection policies.

Donor Signature

Date

Swannanoa Valley Museum Representative

Date

Our Mission:

The Swannanoa Valley Museum preserves and interprets the social, cultural and natural history of the Swannanoa Valley, the pathway to Western North Carolina, by developing dynamic programs and engaging exhibitions for the education and enrichment of the community, its children, and future generations.

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