DOCUMENTARY INTERVIEW RELEASE FORM

My signature below will confirm my agreement with (hereafter "artist"), his/her legal representatives and assigns, course instructor and University at Buffalo (UB) regarding the disposition of audio and/or video documentary and photographs of interviews conducted with me, _____, on (date) _____, on (date)

I understand that the recordings both of me and, if applicable, my property, and transcripts (if transcribed) of the interview(s) will be maintained and made available indefinitely by the artist for such research, production (e.g., radio, television, film festivals, World Wide Web, print publications, exhibitions, related advertisements), and educational purposes as the artist shall determine.

I hereby grant, and transfer to the filmmaker/photographer all rights, title, and interest in the interview and artistic production, including without limitation the literary rights and the copyright. I hereby release the artist, his/her legal representatives and assigns, course instructor and UB from all claims and liability relating to said documentary and photographs.

The artist agrees to retain the integrity of the interviewee's image and voice, neither misrepresenting the interviewee's words nor taking them out of context.

I attest that I have voluntarily agreed to be interviewed and that this document contains the entire and complete agreement concerning the use and preservation of my interview.

| Signature of Interviewee: | Date |
|-----------------------------|------|
| Name (printed): Address: | |
| Telephone and/or E-mail: | |
| Signature of Interviewer: | Date |
| Name (printed): | |