



Deed of Gift—Oral / Living History

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

Name & Address of Interviewee:

Date of Interview: _____ Location: _____

Permission granted to Museum:

I, _____, hereby grant permissions to the Oldsmar Historical Society to use the information collected herewith in this Oral History, along with photos and/or videotapes, in any way the Society deems appropriate to the fulfillment of its mission of education and the preservation and interpretation of the history of Oldsmar. 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 that Oldsmar Historical Society Museum according to its collection policies.

Donor Signature _____ Date _____

Oldsmar Historical Society Representative _____ Date _____

Our Mission

The Mission of the Oldsmar Historical Society, Inc. shall be to collect, preserve, classify, protect, and educate about the history of the city of Oldsmar, and to research, write, publish concerning that history.

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