

*Catching Stories*  
Informed Consent Form

The \_\_\_\_\_ oral history project is sponsored  
by \_\_\_\_\_. Its purpose is to collect interviews with  
people who have knowledge and experience of \_\_\_\_\_. The  
recordings will be used for scholarly and educational purposes as determined by the project.

Your signature indicates that the purposes of the project and the use of the recordings have been explained to you and that you have agreed to be interviewed. You may discontinue participation in the interview at any time without penalty.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (please print clearly)

If interviewee is minor, signature of parent or guardian:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date