

Esther Clark Wright Archives Deed of Gift Agreement

Donor information

Full name:

Mailing address:

Email:

Phone number:

Donation information

Description of donated materials:

Custodial history of donated materials:

Transfer of ownership

I am the sole and legal owner of the materials described herein, and hereby donate materials to Acadia for its Esther Clark Wright Archives. I hereby absolutely, unconditionally (except as may be stated in "other conditions") and irrevocably donate, give, transfer, and assign to Acadia all my rights, title, and interest that I now have or may possess in the future in and to the donation.

I acknowledge that the location, storage, treatment, retention, disposition, arrangement, description, and preservation of the donation in all or part shall be in accordance with the institutional policy of Acadia, in particular policies of the Archives. I grant Acadia University the right to copy, migrate, display, lend, and provide access to these materials in whole or in part and in all forms of media at their discretion.

For born-digital materials (records created in electronic format) within this donation, I agree that Acadia University will be the sole institution at which I will deposit such materials.

Initials of Donor _____

Other conditions, restrictions, or exemptions

Initials of Donor _____

Return of materials not selected

I agree that any donated material that will not be retained by Acadia will either be (select one):

_____ Returned to the donor _____ Disposed of by the archives

Initials of Donor _____

* Note: Reasonable, but not exhaustive, efforts will be made to contact the donor if materials are to be returned. If no contact can be made, the materials will be disposed of by Acadia University

Transfer of copyright

Select one:

_____ I assign and transfer to Acadia all copyright and waive all moral rights to the materials in the donation.

_____ I retain copyright and do not waive moral rights to the materials in the donation.

_____ I am not the copyright owner of the donation.

Initials of Donor _____

Signatures_____
Date of transfer to the Archives_____
Donor_____
Date_____
Accepted by (on behalf of Acadia University)_____
Date

Privacy statement: Personal information collected by the Archives on this form is used solely to administer donations and for no other purposes, and is protected under FOIPOP.