

Written Release Form

Full Name of Person Interviewed

(print): Sophie Holt

Address: 1744 Dean St, Eureka, CA 95501

Phone: (530) 798 1207

Place of Interview: My house

Name of Interviewer & Institution

(print): Zachary Rybal

Date of Interview: 05/04/21

I understand that this interview and any photographs, tape recording, or video recording are part of scholarly research by the individual and institution named above. I give permission for the following (check all that apply):

- May be used for educational and research purposes at the above institution
- May include my name
- May be included in a school publication or exhibit
- May be included in another educational, nonprofit publication or exhibit
- May be used but DO NOT include my name
- May be deposited in a local, state or regional archive
- Other (explain)

Sophie Holt 05/05/21
Signature of Interviewee Date

Signature of Parent or Guardian if Interviewee Is a Minor Date