

# Agreement for Deposit



Reviewed: June 2025

Agreement for Deposit

FORM 0070

## Depositor Details

Depositor Name

Name of affiliated organisation (if applicable)

Address

Phone

Email

I **agree** for my contact details to be made available to the public upon request, if associated with any material I have deposited.

Yes  No

I **agree** to the following conditions:

- I have the legal authority to deposit this item.
- I agree to deposit the item/s specified in the schedule, and any additions I may make to it, unencumbered to the Shire of Esperance Museum and/or its future successor organisations.
- I understand that this material will be held within the Shire of Esperance Museum area and will be available for public viewing, research, reference, publication and exhibition purposes that may include a range of media formats.
- I recognise that this deposit will cause a transfer of legal ownership, including any copyrights such as I may possess, of the items to the Shire of Esperance Museum area and will, on receipt of the item specified, have the absolute right to deal with it/them at its discretion.
- I, the undersigned, hereby donate, without retaining any right of revocation, the item described in the schedule to the Shire of Esperance Museum.
- I do declare that I made the deposit of my own free will and without influence

**Signature of Depositor**

**Date**

**Signature Accepted by Local History Officer**

**Date**



## Schedule of Material

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