Artifact Donation

Are you interested in donating an artifact to the Moravian Historical Society?
Here’s a quick guide for how the donation process works.

1. Any object that is offered to the museum as a donation for the permanent collection must first be approved by our Curatorial Committee, which meets once every three months.

2. If you are leaving an object in the custody of the museum, then you must complete a Temporary Custody Receipt.

3. If you are not leaving the object, please complete the Artifact Donation form and email images to our curator at curator@moravianhistory.org. The information and photos you provide to us will be presented to the Curatorial Committee at the next meeting.

4. Once the Curatorial Committee has made a decision about the object, one of our staff members will contact you.

5. If an item is accepted into the collection, a Deed of Gift will be issued. Donors must sign this form which transfers legal title to the Moravian Historical Society. Title to all donations will be without restriction by the donor.

6. If the Curatorial Committee decides not to accept the object at this time and you have left the object in the custody of the museum, then it is your responsibility to pick up the object by the return date listed on the Temporary Custody Receipt.

Thank you for your consideration!
Donation Form

This form is used when the donor would like an item to be considered for accession by the museum’s Curatorial Committee and the object is not being left in the custody of the museum.

Donor Name:__________________________________________________________

Phone: ___________________  Email: ______________________________________

Object Name: ____________________________  Date/Circa: ______________________

Dimensions: ____________________________  Current Location: __________________

Object Condition:  ___ Excellent  ___ Good  ___ Poor

Description
Please include any background information on where the object came from, how you acquired it, stories associated with it, etc.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Shipping/Transport if accepted:

____________________________________________________________________________________

____________________________________________________________________________________

We will present this information to our Collections Committee at the next meeting and then one of our staff members will be in contact with you.

Thank you for your consideration!
Temporary Custody Receipt

The objects listed below are received subject to the CONDITIONS printed on the reverse. Depositor must agree to and sign CONDITIONS on the reverse side:

Name: _____________________________________________________ Date: __________________________

Address: ________________________________________________________________________________

City: __________________ State: __________ Zip: __________

Phone #: __________________ Email: __________________________________________________________

The items listed below are left in the custody of the Moravian Historical Society to be considered as:

____ An unconditional donation. The Museum reserves the right to keep, lend, or otherwise dispose of the donated material.

____ To be considered for acquisition.

____ For other. Please specify: ____________________________________________________________________

If not accepted for acquisition:

____ Source will pick up by the following return date: __________________

____ Please dispose of ____ May be sold to benefit the Moravian Historical Society

Items and Description:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Date received: ____________          Depositor: ________________________________

Museum: ______________________________

Date returned: ____________          Depositor: ________________________________

Museum: ______________________________
CONDITIONS

1. The objects are accepted by the Museum for the benefit of the depositor and the Museum assumes no responsibility. The depositor hereby agrees to release and hold harmless the Museum, its employees, officers, and agents from any liability in connection with the objects while on deposit or in transit.

2. Attributions, dates, and other information shown on the face are as given by the depositor. They are not to be construed as endorsed by the Museum. The fact that objects have been in the Museum’s custody shall not be misused to indicate Museum endorsement.

3. Objects may be photographed and examined, but will not be treated, restored, or altered without written permission of the depositor.

4. If there is a change in identity and/or address of the depositor or owner, the Museum must be notified promptly in writing. Objects must be claimed on or before the removal date noted on the face of the receipt. If one other than the original depositor claims the objects, the Museum reserves the right to request proof of legal authority to receive the material before objects will be released.

5. If the depositor of record fails to collect the objects after the removal date, the Museum will mail the depositor at its address of record a warning to remove. The Museum assumes no responsibility to search for a depositor (or listed owner) not located at the address of record. If after one (1) month from removal date noted on the face of this receipt objects have not been claimed, then the objects shall be considered unrestricted gifts to the museum.

6. This agreement shall be construed in accordance with the laws of the Commonwealth of Pennsylvania.

I have read and agree to the above CONDITIONS, and I certify that I have full authority to agree thereto.

Depositor: ___________________________ Date:____________________

If the depositor is not the owner, complete the following:

Name of Owner: ___________________________

Address of Owner: ____________________________________________

______________________________________________________________

______________________________________________________________