Sample Language

If Client plans to transfer ownership of Nano mini-exhibition to another institution.

*This language is provided as an example only! Please be sure to…*

* Modify this language to meet your needs
* Consult with your own legal staff/advisors about any planned ownership agreements
* Always attach your original ownership agreement with The Science Museum of Minnesota to any other ownership agreements executed

Transfer of Ownership for *Nano* mini-exhibition

Between [Museum X] and [Museum Y]

This Transfer of Ownership (the Transfer) is made on this DATE, by and between MUSEUM X and MUSEUM Y, for the purpose of a transfer of ownership of the *Nano* mini-exhibition.

**Purpose**

MUSEUM X agrees to transfer ownership of the *Nano* mini-exhibition to MUSEUM Y. All terms of the original ***Ownership Agreement*** for the *Nano* Mini-exhibition made between MUSEUM X and the Science Museum of Minnesota shall remain intact, transferring to MUSEUM Y through this agreement. A copy of the original ***Ownership Agreement*** shall be attached to this Transfer of Ownership.

All logistics, labor and costs incurred share be the responsibilities of MUSEUM X and MUSEUM Y to be determined between both parties as part of this transfer of ownership.

**Obligations:**

MUSEUM X AND MUSEUM Y DEFINE OBLIGATIONS HERE regarding

* + Schedule: [DESCRIBE HERE]
	+ Transportation Expenses: [DESCRIBE HERE]
	+ Maintenance Expenses: [DESCRIBE HERE]
	+ Liability: [DESCRIBE HERE]

**- Signature Page Follows -**

**Understanding:**

The undersigned affirm that the transfer of ownership shall be effective upon the signature of both parties, that all obligations of this understanding are mutually agreed upon and that all terms and conditions between both parties of this Transfer of Ownership will be fulfilled.

 MUSEUM X

 ADDRESS

 CONTACT & TITLE

 CONTACT PHONE

 CONTACT EMAIL

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

 AUTHORIZING SIGNATURE NAME & TITLE

 MUSEUM Y

 ADDRESS

 CONTACT & TITLE

 CONTACT PHONE

 CONTACT EMAIL

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

 AUTHORIZING SIGNATURE NAME & TITLE

Sample Language

If Client plans to lend Nano mini-exhibition to another institution.

*This language is provided as an example only! Please be sure to…*

* Modify this language to meet your needs
* Consult with your own legal staff/advisors about any planned lending or sharing agreements
* Always attach your original ownership agreement with The Science Museum of Minnesota to any other loan or sharing agreements executed

Loan Agreement for *Nano* mini-exhibition

Between [Museum X] and [Museum Y]

This Loan Agreement (the Agreement) is made on this DATE, by and between MUSEUM X and MUSEUM Y, for the purpose of a loan of the *Nano* mini-exhibition.

**Purpose**

MUSEUM X agrees to loan the *Nano* mini-exhibition to MUSEUM Y. Both parties shall agree upon a specific schedule for this loan period. All logistics, labor and costs incurred shall be the responsibilities of MUSEUM X and MUSEUM Y, to be determined between both parties as part of this Agreement.

All terms of the original ***Ownership Agreement*** for the *Nano* Mini-exhibition made between MUSEUM X and the Science Museum of Minnesota shall remain intact.  A copy of the original ***Ownership Agreement*** shall be attached.

**Obligations:**

MUSEUM X AND MUSEUM Y DEFINE OBLIGATIONS HERE regarding

* + Schedule: [DESCRIBE HERE]
	+ Transportation Expenses: [DESCRIBE HERE]
	+ Maintenance Expenses: [DESCRIBE HERE]
	+ Liability: [DESCRIBE HERE]

**- Signature Page Follows -**

**Understanding:**

The undersigned affirm that the Loan Agreement shall be effective upon the signature of both partiers, that all obligations of this understanding are mutually agreed upon and that all terms and conditions between both parties of this Loan Agreement will be fulfilled.

 MUSEUM X

 ADDRESS

 CONTACT & TITLE

 CONTACT PHONE

 CONTACT EMAIL

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

 AUTHORIZING SIGNATURE NAME & TITLE

 MUSEUM Y

 ADDRESS

 CONTACT & TITLE

 CONTACT PHONE

 CONTACT EMAIL

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

 AUTHORIZING SIGNATURE NAME & TITLE