

## STUDENT ACCOUNT AGREEMENT

### Student Section

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

School \_\_\_\_\_

I have read the district Acceptable Use Policy. I agree to follow the rules contained in this Policy. I understand that if I violate the rules my account can be terminated and I may face other disciplinary measures.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

### Parent or Guardian Section

I have read the district Acceptable Use Policy

I hereby release the district, its personnel, and any institutions with which it is affiliated, from any and all claims and damages of any nature arising from my child's use of, or inability to use, the district system, including, but not limited to claims that may arise from the unauthorized use of the system to purchase products or services.

I will instruct my child regarding any restrictions against accessing material that are in addition to the restrictions set forth in the district Acceptable Use Policy. I will emphasize to my child the importance of following the rules for personal safety.

I give permission to issue an account for my child and certify that the information contained in this form is correct.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_