

Form - Electronic Resources

Individual User Access Informed Consent Form

In consideration for the privilege of using the school's digital network, I hereby release Centerville School District from any and all claims and damages arising from using the network. Further, my child and I agree to abide by the District's Policy and Procedures for Electronic Information Systems, which we have reviewed and understand, and we acknowledge that failure to comply with the policy and procedures may result in revocation of network use privileges. My child and I acknowledge and agree that Centerville School District has the right to review, edit or remove any materials installed, used, stored or distributed on or through the network or District's system including e-mail and other electronic messages and we hereby waive any right of privacy which my child or I may otherwise have into such material. My child and I acknowledge and agree that any copyright my child may have in material posted on the Internet through the school district's system is waived.

Signature of User

Signature of Parent/Guardian
(required if user is under age 18)

Printed Name of User

Printed Name of Parent/Guardian

Address

Address

City/State/Zip

City/State/Zip

Phone

Phone

Date Signed

Date Signed

Adoption Date: November 28th, 2017