

**Telluride Middle High School
BYOT Checkout Form
2018-2019**

(Only to be filled out and payment made if your student chooses to not use a personally-owned device. This program is optional for Grades 8 -12)

Parent Section:

I hereby release Telluride School 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 Telluride School District network. I understand that it is impossible for the Telluride School District to restrict access to all controversial materials and I will not hold the District responsible for materials accessed on the network.

I accept full responsibility when my child's use of technology is not in a school setting and understand that my child is subject to the same rules and agreements while not at school. I understand that the Telluride School District encourages parents and guardians to supervise and monitor any online activity. I am aware that I may ask for my child's username and password at any time.

I understand that it is my child's responsibility to treat the school's technology equipment gently. The insurance policy costs \$50 per device and carries an additional \$100 deductible for each claim. Failure to return the device will result in a \$250 charge. These costs are the financial responsibility of the student's family. If my child repeatedly misuses or damages his/her device, their privileges of use will be restricted.

_____ I have read Policy JS, Student Use of the Internet and Electronic Communications, as posted on the Telluride School District website.

Printed Name of Student _____ (must be legible)

Grade 2018/19 _____

Parent Signature _____ Date _____

Office Use Only:

\$50 paid _____ Cash _____ Check _____

Computer # _____ Received by front office: _____