Student and Parent AUP Signature Form

As the parent/guardian, my signature indicates I have read and understand all agreements, policies, rules, permissions, and responsibilities in the School Acceptable Use Policy, the Network and Internet Safety Policy, COPPA, and Insurrance Agreement. I agree to the terms, and I give my permission for my child to have access to the described technology resources.

Parent/Guardian (please print):	
Parent/Guardian Signature:	Date:
rules, and permissions, and responsibilities and Internet Safety Policy, COPPA, and all	ve read and understand all agreements, policies, in the School Acceptable Use Policy, the Network my teacher/classroom technology rules. I agree to and to use these resources for educational purposes.
Student (please print):	
Student Signature:	Date:
Grade:	
Advisor / Homeroom Teacher:	
Insurance Agreement	
pay the insurance fee, the parent/guardian	h, and 8th grade students. Should there be failure to is fully responsible for the cost of repairs or aff of Union Ridge School. A \$50 fee will be due after
2018 - 2019 Accidental Insuran	ce Coverage Cost
5th Grade: \$25	A.
6th - 7th - 8th Grade: \$25	Return
Insurance does not cover loss, intentional damages, vandalism, theft from unlocked vehicle, mysterious d cosmetic damage, corrosion & rust, and breakdown.	
Office Use Only	
Insurance fee received:	Date: