

**Russell County School District
Student Internet Account Agreement**

Student Section

Student Name _____ Grade _____

School _____

I have read the Acceptable Use Policy for Electronic Communications/Media Production on pages 29-33.

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 Name _____ Date _____

Parent or Guardian Section (Must have both signatures)

I have read the Acceptable Use Policy for Electronic Communications/Media Production on pages 29-33.

(If dial-up access is provided—I will supervise my child’s use of the system when my child is accessing the system from home.)

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 Signature _____ Date _____

Parents Names (print) _____

Parent E-mail Address _____

Home address _____ Phone _____

This space reserved for System Administrator

Assigned User Name _____

Assigned Temporary Password _____