RETURN THIS PAGE TO CHECKOUT A DEVICE
Fontana Unified School District
Laptop Distribution Agreement
Signature Form
I have read and understand the Laptop Distribution Agreement and agree to the terms of the agreement. I am
responsible for any damage or lost laptop and/or laptop components.
Student Agreement
Student Full Name (Printed) ____
Student Signature ____
Student I.D. Number ____
Parental Agreement
As a parent or guardian of the above-named student, I have read, understand, and agree that my student shall
comply with the terms in the above Laptop Distribution Form. I agree to release from liability, indemnify, and hold
harmless the school, district, and district personnel against all claims, damages, and costs that may result from my
student’s use of the laptop or the failure of any technology protection measures used by the District. Further, I
accept full responsibility for supervision of my student’s use of his/her e-mail and internet access account if and
when such access is not in the school setting.
Parent/Guardian Name (Printed) ____
Parent/Guardian Sig