



Good Foundations Academy

5101 South, 1050 West, Riverdale, Utah 84405

Main: 801.393.2950 FAX: 385.333.7245

Website: <http://gfautah.org> For info: askgfa@gfautah.org

GFA Chromebook Checkout Agreement

Name of Responsible Parent / Guardian (printed): _____

Valid Phone #: _____ Valid Parent Email: _____

Valid Current Address: _____

GFA Students that may use Chromebook: _____

To register to check out a Chromebook, go to <http://www.ptcfast.com/reg1> use the code - B0N1310168

Appointment Date - _____ Time - _____

If possible, print this form out and bring it with you to the appointment. If not, come 10 minutes early and you can fill out this form when you get to the school. We will disburse from the West (Cafeteria) entrance.

Initials (Required)

____ I understand that this form is a formal request to borrow a Chromebook and charging cord from Good Foundations Academy from the date this form is signed until no later than May 29, 2020.

____ I understand that the opportunity to use this Chromebook is a privilege that GFA gives to students, provided that the technology is used responsibly. I understand that this Chromebook is to be used for homework and appropriate family use only, that the student will be supervised at all times while using this Chromebook, and that usage on this Chromebook will be monitored by GFA. Any access of "inappropriate matter," meaning pornographic or indecent material as defined in Utah Code §76-10-1235 (1)(a), will violate this agreement.

____ I accept responsibility for all items that are checked out and will return them in the same condition as they were received. I will ensure the safe and timely return of this Chromebook and charger within the loan period. I understand that I am financially responsible for the loss or willful, malicious or accidental damage or loss of this Chromebook and charger. The value of this Chromebook and charger is \$200.00.

____ I understand that loss or damage of this equipment may result in loss of future checkout privileges. Students will not be able to withdraw from enrollment at the school without returning the equipment checked out to them, or paying GFA for any loss or damage. I also understand that this agreement is not eligible for fee waiver forgiveness.

My signature indicates that I agree to all conditions listed above.

Parent Signature: _____ **Date:** _____

This part to be filled out by GFA staff

Serial # (last 6 digits) _____ Cart # _____ ID # _____ Charger Y / N _____ Condition: E G F P