

**ATTICA CITY LIBRARY  
USER AGREEMENT AND PERMISSION FORM**

I \_\_\_\_\_ (PRINT NAME) HAVE  
READ THE ATTACHED COMPUTER POLICY OF THE ATTICA CITY  
LIBRARY AND AGREE TO ABIDE BY THESE RULES AND REGULATIONS  
SUBJECT TO DISCIPLINARY ACTIONS.

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(SIGNATURE)

(DATE)

**PARENT OR GUARDIAN**

AS PARENT OR GUARDIAN OF THIS CHILD (17 OR  
YOUNGER) I HAVE READ THE COMPUTER AND INTERNET USE  
POLICY GUIDELINES. I UNDERSTAND THAT THIS ACCESS IS  
DESIGNED FOR EDUCATIONAL PURPOSES. I UNDERSTAND THAT THE  
LIBRARY WILL NOT RESTRICT ACCESS TO CONTROVERSIAL MATERIAL.  
I WILL NOT HOLD THE LIBRARY RESPONSIBLE FOR MATERIALS  
ACQUIRED ON THE INTERNET. FURTHER, I ACCEPT FULL  
RESPONSIBILITY FOR SUPERVISION OF MY CHILD WHEN HE/SHE IS IN  
THE LIBRARY. I HEREBY GIVE PERMISSION FOR MY CHILD TO USE  
THE LIBRARY COMPUTER.

DATE: \_\_\_\_\_

PARENT OR GUARDIAN \_\_\_\_\_