

Dixon Township Library
COMPUTER USE CONSENT FORM

I, _____, (print name) have read the attached computer policy of the Dixon Township Library and agree to abide by these rules and regulations subject to disciplinary actions.

(signature)

(date)

PARENTAL CONSENT FORM

I, _____, (print name) give my child, _____, (print child's name) permission to work on the public access computer at the Dixon Township Library. We have read and discussed the attached policy and agree to abide by these rules and regulations subject to disciplinary actions.

Yes, my child may access the internet _____

No, my child may not access the internet _____

(child's signature)

(date)

(parent's or guardian's signature)

(date)