

Gothenburg Public School
Computer Damage/Loss Cooperative Program Application Form

2016-2017 School Year

Please read this entire document to determine if this program is desired for you and your student to provide protection against damage and/or loss of the loaned computer and equipment in your care. Participation in this program is VOLUNTARY.

COVERAGE AND BENEFIT: This program covers the computer and accessories (Equipment) loaned to the student against all accidental damage (Damage) to Equipment or loss of Equipment (Loss). The Damage/Loss program covers one major part replacement claim per year; and \$125 for Loss. Major parts include, but are not limited to, motherboard, lcd display, glass replacement, and keyboard/trackpad. Subsequent claims for part replacements are not covered. Total cost of the Damage or Loss (actual cost of parts plus labor for Damage) will be determined by the Gothenburg Public School (District).

THIS PROGRAM DOES NOT COVER INTENTIONAL DAMAGE OR THEFT OF THE EQUIPMENT BY THE COVERED STUDENT OR HOUSEHOLD MEMBERS.

EFFECTIVE AND EXPIRATION DATES: This coverage is effective from the date this form and the premium payment are received by the school through the date provided by the District at, or near the end of, the school year for return of the Equipment.

PREMIUM: The total premium cost is \$25 per school year.

PROGRAM DESCRIPTION: The District offers your student the opportunity to participate in this Computer Damage/Loss Cooperative Program. This program is designed to protect students and families in the event the Equipment is lost, stolen, or damaged as described above. A separate form must be completed for each computer covered. One form per student is required.

Student Name: _____ Grade Level: _____

YES I would like to participate in the Computer Damage/Loss Cooperative Fund Program. I agree to the terms of participation including my responsibility for Damage or Loss not covered by the program. \$25 Payment (cash or check) is attached.

Date: _____ Parent Signature: _____

NO I decline to participate in the Computer Damage/Loss Cooperative Fund Program. I understand that I am responsible for 100% of any Damage or Loss to loaned Equipment. Total replacement cost for the Equipment is currently \$250.

Date: _____ Parent Signature: _____