



Wyalusing Area School District
PO Box 157, Wyalusing, PA 18853 (570) 746-1600

Insurance Waiver

YES, I am accepting the optional insurance offered by Wyalusing Area School District. I understand that it is an annual payment that I must accept or deny yearly.

- 1) I understand that the insurance covers a limited amount of accidental damage, not negligence or intentional damage or loss of accessories or peripherals.
- 2) Should my child's device be inoperable, a spare or loaned device will be provided for use until the original device is repaired.

NO, I am declining the optional insurance offered by Wyalusing Area School District. I accept and understand the following:

- 1) By declining the optional insurance, I understand all damage that is accidental, negligent, or intentional will be fully my responsibility.
- 2) All payments for damage must be paid within 30 days of invoicing or legal action will be taken to recover the cost of repairs.
- 3) Should my child's device be inoperable, a spare or loaned device will be provided for use until the original device is repaired.

Student Name: (printed)	
Student Name: (signature)	
Parent Name: (printed)	
Parent Name: (signature)	
This agreement is in effect during the 2019/2020 School Year.	