

**STUDENT LAPTOP HIRE AGREEMENT FORM – 2024 DAY HIRE PROGRAM**

The following is to be read and completed by both the STUDENT and PARENT/CAREGIVER:

STUDENT AGREEMENT	STUDENT PARTICIPATION		
	I wish to participate in the 2024 Beerwah State High School Laptop Day Hire Program Subject to Device Availability. I have read and understood the above agreement and the Student Code of Conduct available on the Beerwah SHS website. I agree to abide by the guidelines outlined in both documents. I acknowledge my responsibility to use the laptop in accordance with these rules and understand the consequences should I fail to abide by these rules.		
	Student Name:		
	Year Level:		
	Username / Log On (if known):		
Student Signature:		Date:	

PARENT/GUARDIAN AGREEMENT	LAPTOP HIRE PROGRAM		
	I give permission for my child to participate in the 2024 Beerwah State High School Laptop Day Hire Program. I have read the above agreement and understand my responsibilities. I agree to abide by it and pay all costs that may occur should the laptop and / or its accessories be lost or damaged.	Yes	No
	I have read and understood the ICT Responsible Use Agreement available on the Beerwah SHS website.		
	PAYMENT ARRANGEMENT – ANNUAL FEE OF \$100.00 (PRO RATA BASED ON ENROLMENT) (please tick one)		
	<input type="checkbox"/>	Now: I wish to make full payment now as a single payment of the total annual fee of \$100.00 (or Pro Rata)	
	<input type="checkbox"/>	Semester Instalments: I understand I will be invoiced for the total amount however I wish to make instalment payments, during the first two weeks of the first three terms, in the following proportion of the total amount: Semester 1 Term 1: \$50 prior to collection Semester 2 Term 3 (by week 1): \$50	
<input type="checkbox"/>	An instalment plan as negotiated with the school \$		
I agree to make payment by the due dates and I understand that any failure to make payments by these dates may result in the cancellation of my child's participation in the Laptop Hire Program and debt recovery action being undertaken. I understand my student will not be permitted to participate in optional school activities if my payment arrangement falls into arrears.			
Parent / Caregiver's Name:			
Parent / Caregiver's Signature:		Date:	

OFFICE USE ONLY

Payment Received On:		Laptop Issued On:	
Equipment Details	Make / Model	EQ Asset Number	Asset Serial Number
Laptop			