

**Hicksville Exempted Village School District**  
**Computer Protection Fund**  
**2009-2010 School Year**  
**Application Form**

Please read this entire document to determine if this program is needed for you and your child's protection against damage and loss of the loaned computer equipment in your care. This form must be completed and marked YES or NO before the computer will be provided to the student.

**Coverage and Benefit**

This agreement covers the computer loaned to the student against all damage or loss over \$200.00. Accessories and damages valued at less the \$200.00 are **not** covered and are the responsibility of the student. Coverage is 24 hours per day. In the event of damage or loss, your responsibility will be \$200.00 and the Protection Fund will cover the remaining balance.

**Effective and Expiration Dates**

This coverage is effective from the date this required form and premium payment are received by the school through the date at which the computer is required to be returned in good order to the school.

**Premium**

The total premium cost is \$50.00 per school year for Freshman, Sophomores and Juniors and is \$40.00 for Seniors. Partial semesters are not refundable.

It is agreed and understood that:

- The Hicksville High School Protection Fund will offer coverage to all students
- Participation is totally voluntary
- A separate application will be needed for each computer covered

**If you wish to enroll, please complete the following information and return this form with a check for the coverage requested to the main office prior to your student being allowed to take their computer home in August.**

Name of Student: \_\_\_\_\_

Grade: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Yes, I would like to participate in the Damage/Loss Cooperative

No, I decline service, at this time, and I understand I am responsible for 100% of any damage or loss to the loaned computer and that the computer will remain at school. The student will have access to the computer during school hours including supervised extended hours.

Parent/Guardian Signature: \_\_\_\_\_