

APPENDIX F

WAIVERS

Wireless Internet Use Age Waiver and Informed Consent Form

THIS WAIVER MUST BE COMPLETED BY THE PARENT OR GUARDIAN IN THE PRESENCE OF A LIBRARY STAFF MEMBER.

I, _____, parent or legal guardian of
_____, a child under 18 years of age,

request that the age restrictions be waived for the above mentioned child. I assume full responsibility for my child's compliance with all the regulations and restrictions defined in Salem Public Library's Wireless Internet Access Policy.

I have been informed in reviewing this consent form that I have access, as a patron of the Library, to the Library's Wireless Internet Access Policy under 15 CSR 30-200.015 of Missouri State Regulations and that it is my responsibility to review the Policy, if so desired. The Policy can be accessed online at <https://www.salempubliclibrary.net/about-us/library-policies/internet-use-policy> or by requesting a physical copy at the Library's circulation desk.

Internet supervision is the responsibility of the parent or legal guardian. Children under the age of 18 must be accompanied by a parent/guardian approved adult user who has a responsibility statement on file, or have a signed waiver form from a parent or legal guardian on file. This waiver gives parental/guardian permission and approval for the minor to access the Internet without adult supervision.

While library personnel does not provide monitoring of minors, those found to be accessing sites, using electronic mail, chat rooms, and other forms of direct electronic communications to engage in offensive, disturbing, potentially harmful and/or illegal communications, or gaining unauthorized access, including "hacking" and other unlawful activities can have their Internet rights revoked and their parents/guardians notified.

I understand that my child will be expected to conduct himself/herself in a quiet, orderly manner while at the library. The librarian may request the child to leave the premises if conduct is inappropriate. Loss of Internet privileges may result if negative behavior is repeated.

Student's Signature

Date

Parent/Guardian Signature

Date

Address

City

State

Zip Code

Phone Number