



# Loudonville Public Library

## Internet Use Application

This application is to verify a child's permission to use Library computers or the Library's wireless network in the absence of a parent or guardian. This form is intended only for use when it is deemed inappropriate by the parent/guardian for the child to have a card of their own. Please completely fill out the form below and return it to the Library.

### Applicant's Information (please print clearly):

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ (to determine date of expiration)

### Parent/Legal Guardian Information (please print clearly):

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Telephone Number (include area code): \_\_\_\_\_  Home  Cell  Work

E-Mail Address: \_\_\_\_\_

Contact information will only be used in the event we need to contact the guarding regarding their child's use of the computer or their behavior.

### Please read and sign below:

I have read, understand, and discussed with my child under the age of 18 the Library's disclaimer on Internet use. I will comply with the policies and procedures concerning Internet access and **allow** my child to utilize the OPLIN/Internet terminals. I realize that there is potentially dangerous and objectionable content on the Internet. As the parent/guardian/person serving *in loco parentis*, I understand that it is my right, and my right alone, to decide what sort of content is appropriate for my family. I will instruct my child on what he/she may access and for what purposes he/she may use the Internet. As the parent/guardian/person serving *in loco parentis*, I will take full responsibility for whatever my child may find on the Internet. I further understand that the library does not monitor and has no control over the information accessed through the Internet and will not be held responsible for its content. I agree to observe all rules established by the library and that my child will be expected to do so as well. I understand that if I choose to rescind this permission that I must contact the library to do so and that restoring the privilege will require my child to reapply.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

The child will be assigned a username for accessing the network based on their name. Please indicate the desired password. This password will **ONLY** be used to access the internet on the Library's network. Any combination of letters and numbers may be used so long as it will be memorable to the child and is not deemed to be inappropriate. In the event that no password is chosen or that the chosen password is deemed by the Library to be unsuitable, a generic one will be provided. The password can be changed upon request. Some processing time may be required.

\_\_\_\_\_

### LIBRARY USE ONLY

Today's Date: \_\_\_\_\_

Staff Initials: \_\_\_\_\_

Assigned Username: \_\_\_\_\_

Assigned Password: \_\_\_\_\_

Last Name:

First Name:

M.I.