



Meridian Public Schools

72380 560th Avenue
P.O. Box 190
Daykin, NE 68338

Phone: 402-446-7265

www.meridianmustangs.org

Fax: 402-446-7246

Randall L. Kort, Superintendent

Harold L. Scott, Principal

****This form must be completed and returned to the school before a laptop computer/chromebook will be checked out to your student.****

Name of Student: _____

Today's Date: _____ Grade: _____

Address: _____ Zip Code: _____

Home Phone: _____ Other Phone: _____

Please select one of the options below:

Option 1

_____ Yes, the laptop/chromebook will be covered by homeowner's insurance.

Insurance Provider: _____ Policy Number: _____

Option 2

_____ Yes, I would like to participate in the insurance plan.

This plan involves a non-refundable \$25.00 enrollment fee with a deductible of \$250.00 per incident.

\$25.00 Payment: Check #: _____ Cash Other: _____

Option 3

_____ No, I decline service at this time. I understand that I am responsible for 100% of any damage or loss to the loaned laptop. (Please note that laptop replacement can cost up to \$1200.00)

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

****Note: Failure to return a signed form by the last day in August will result in Option 3.**