



Bertram iPad 1:1 Program 2017 PP-Year 6

My child _____ from LA _____ will be participating in the Bertram 1:1 iPad Program for PP-Year 6.

My child's iPad has been purchased from:

Winthrop Technology

or

Other sources

Insurance

I have purchased insurance through Winthrop Technology.

I have made arrangements for my child's iPad to be covered by my insurance policy and

I understand private insurance is my **only** option to claim for any damage which may occur.

I have clearly marked my child's iPad and cover with their name.

My iPad serial number is: _____

Name of Parent / Caregiver: _____

Signature of Parent / Caregiver: _____

Contact details: _____

Date: _____

This document must be completed and returned to your child's LA teacher before they can use their iPad at school.