



Culford

Acceptable Use Agreement

ICT SERVICES

Pease complete the form in block capitals

Pupil's Name_____Class_____		
<input type="checkbox"/> We have discussed this document and my son/daughter agrees to follow the eSafety rules and to support the safe and responsible use of ICT at Culford School.		
Name of Parent_____	Signature_____	Date_____

Please return this form to Culford School for our records.