

# Mathematics Department Calculator Distribution Agreement Contract

Name \_\_\_\_\_ Class \_\_\_\_\_ Hr \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number (\_\_\_\_\_) \_\_\_\_\_  
Student Number \_\_\_\_\_ Teacher \_\_\_\_\_

**Agreement: I assume the responsibility for the described calculator below. If it is stolen, broken, or misused I will pay the replacement costs up to the value of the calculator.**

**Parent / Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Information: (to be completed by teacher)

1. Calculator Type (Model): \_\_\_\_\_
2. Calculator Engraved Number: \_\_\_\_\_
3. Calculator Serial Number: \_\_\_\_\_
4. Calculator Value: \_\_\_\_\_
5. Calculator Condition: (circle one)      New      Used
6. Describe any details about the outside of the calculator:

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