



Insurance purchase is allowed only within the first 10 days of enrollment, and does not cover stolen or lost devices or chargers. By completing this form, you are agreeing to purchase and pay for insurance for your student's device.

I will purchase the following insurance plan for my student's device:

- Please list the names, grades, for student insurance purposes**

[illegible]

Please indicate your method of payment below:

- ☐ Cash (**exact change only**)
- ☐ Check made out to school
- ☐ Debit or credit online at <https://osp.osmsinc.com/MorganGA/> or scan QR code below

Confirmation # Required for OSP: _____



OSP Online

If at any point Morgan County Charter School District feels that the terms of this agreement have been violated, loss of privileges to use the device and other disciplinary actions may be taken. The district reserves the right to pursue all options in collection, including any necessary legal action, of costs incurred through Chromebook repair or loss.

By signing this contract, I (parent/guardian) understand and agree to purchase the insurance plan indicated above, and agree to all terms outlined above concerning the insurance policy of my student's assigned Chromebook at Morgan County Charter School System.

Print Parent/Guardian Name

Sign Parent/Guardian Name

Date