BTPL CASL Device Use Permission Form

I _____ (print name) give my express consent to staff of the Brock Township Public Library to download apps, and otherwise demonstrate device functionality, as per my request and in my presence.

I understand that downloading an app, or otherwise handling the device, may result in data being deleted from my device. The Brock Township Public Library and/or staff will not be held responsible for deletions of personal information and/or previously downloaded applications, nor will they be held responsible for any damage done to the device when handled at my request.

I understand that I may withdraw my consent for staff to download to and/or handle my device at any time. Requests to withdraw permission may be made by any of the following methods:

- in person at any branch of the BTPL
- written request
- contacting the BTPL by telephone at 705-426-9283
- by email to info@brocklibraries.ca

_____(YY/MM/DD) _____

Date Email Address

_____

Signature

☐ I wish to withdraw my device use consent Date:_____

_____ Attached supporting documentation as appropriate.

Signature