



**School District 84  
Vancouver Island West**

## **Operations Department**

Box 100, Gold River, BC V0P 1G0

Ph: 283-2411 Fx: 283-2636

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### **KEY SIGN-OUT & ACCESS CODE AGREEMENT**

*Please Print*

Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
School: \_\_\_\_\_

	<b>Key #</b>	<b>Key Description:</b>
(1)	_____	_____
(2)	_____	_____
(3)	_____	_____
(4)	_____	_____
(5)	_____	_____

- I agree not to loan, transfer, give possession of, misuse, modify or alter the keys or access number. I further agree not to cause, allow, or contribute to the making of copies of the keys, or the handing out of the Security Access Code, which has been entrusted to me.
- I understand and agree that violation of this agreement may render me responsible for the expenses of a relock for the affected areas.
- If you suspect that your number is no longer confidential, please contact the Operations Department immediately.
- Any lost or misplaced keys must be reported to the Operations Department immediately.

Signature: \_\_\_\_\_