

Dear Parents or Guardians:

Lynden School District and Whatcom County Library System have a partnership called ConnectEd that will give K-12 students access to the best educational resources and learning materials in our libraries and on the internet.

Through the partnership, Lynden School District student IDs will be used as WCLS library card numbers, allowing students to:

- Borrow 4 items at a time, such as books, magazines, audiobooks from any WCLS location
- Access digital content including eBooks and eAudiobooks
- Incur no overdue fines for items
- Use computers with filtered internet access at any of the library locations

Parent/Guardian Signature:

- Access other educational resources, such as online encyclopedias, using the internet from school or home
- Reserve public library books using a school ID account

This new library access is in addition to, and separate from, a personal WCLS library card that a student may already have.

To enable the use of a student ID as a library card number, Lynden School District will share the following student information with WCLS:

- Student ID
- Student Name (First & Last)
- Student Address
- School Name
- Grade Level

- Date of Birth
- Home Address
- Home Telephone Number
- Parent Email Address

No other information will be shared. Information shared with WCLS will not be shared or used outside of partnership activities.

If you would like your child to access public library resources using his/her school ID, you do not need to do anything.

Your child will automatically be enrolled. To opt your student out of public library access using his or her school ID, please complete the form below and turn it in to your school office by September 15. School secretary/office will send your Opt-Out to the District Office to process.

We look forward to joining with you in this partnership, which will give students easier access to books and other resources that will help them succeed! You can read more about the partnership at www.wcls.org/student-library-cards.

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to par	ticipate, then please print, complete, and return this opt	om County Library System and Lynden School District: If you do NOT want your chi- out form each school year to your child's school office, by September 15. Your scho student is approved/enrolled unless opted out annually by parent/guardian.
	Child's Name: (Please print, First + Last Name):	
	School:	Grade:
	Parent/Guardian Name (please print):	