NESHAMINY HIGH SCHOOL

WORLD LANGUAGES DEPARTMENT

BOOK RECEIPT

Dear Parents or Guardians,

 We are asking for your cooperation in maintaining the integrity of the World Language textbooks. Every student is responsible for his/her book and fines may be assessed at the end of the school year if books are damaged due to misuse, not normal wear and tear.

**The fines are as follows:**

Damaged pages- $5 per page

Ripped pages- $5 per page

Writing/drawing/stains on pages- $5 per page

 Damaged Binding- $13

Damaged corners- $5 per corner

Water damage- Book replacement of $85

Lost pages- Book replacement of $85

Writing on back and/or front cover of book- $20

Damaged cover- $10-30

**\*Using a book as a folder will damage the binding and a fine will be assessed.**

Covering a textbook will minimize greatly the probability of damage.

Book Receipt Form

TEACHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PERIOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT GRADE LEVEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BOOK TITLE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE STUDENT MUST TURN IN THE **ABOVE WRITTEN NUMBER** IN ORDER TO AVOID PAYING A REPLACEMENT BOOK COST OF $85 FOR THE BOOK. A BOOK WITH A DIFFERENT NUMBER IS SOMEONE ELSE’S BOOK AND DOES NOT FULFILL THE OBLIGATION.

PLEASE DESCRIBE ANY DEFECTS THAT YOUR BOOK HAS. (BE SPECIFIC.) EXAMPLE: WRITING ON PAGE 19, DAMAGED RIGHT CORNER, ETC.

PLEASE BE THOROUGH. IF THERE ARE ANY DEFECTS AND YOU DO NOT NOTE THEM HERE, YOU MAY BE CHARGED WHEN THE BOOK IS RETURNED. PLEASE CONTINUE ON BACK IF MORE SPACE IS NEEDED.

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Our signatures acknowledge that we have read and understood the request for proper care of textbooks.

*Parent/Guardian signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Student name* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Student signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Date*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_