Baylor University
Visitor Internet Access Agreement
Complete all sections in ink.

I have read and agree to the Baylor University Technology Systems Usage Policy BU-PP025.

__________________________     ____________________
Signature                        Date

Information on your government-issued photo ID:

Current information (if different)

______________________________     ____________________
Printed Name                        Printed Name

______________________________     ____________________
Address                             Address

______________________________     ____________________
City       State           Zip           City       State           Zip

Persons completing this form must be 18 year of age or older.
Minors must have an adult with them who completes this form and takes responsibility for compliance with the usage policy.

***For Staff Use***

ID verified by: ____________________     Date: ___/___/______

ID type:
☐ driver’s license
☐ MCC
☐ TSTC
☐ high school ____________________
☐ other ____________________

Start time: ___:______ am / pm

Computer Used:

Visitor Account:
☐ txlib
☐ ablib
☐ bcpmlib