STATEMENT OF RESPONSIBILITY

Materials in the Texas Department of State Health Services Audiovisual Library collection are state property. Texas residents 18 years and older are eligible to borrow audiovisual library materials. The person signing the Statement of Responsibility form is responsible for borrowed media. Borrower responsibility includes:

1. **Prompt return of materials by the scheduled date.** The borrower is responsible for return shipping costs. Any borrower with three late returns will have Audiovisual Library privileges suspended. No more orders will be shipped to borrowers with materials more than two weeks late. Failure to return borrowed media upon request will be viewed as theft of state property in violation of Section 31.03, Texas Penal Code, the conviction of which could, depending on the value, result in a fine not to exceed $500 (Class C Misdemeanor), to confinement up to 10 years and a fine up to $10,000 (Third Degree Felony). **Please return materials by U.S. Mail, UPS, FedEx, or other insured carrier.**

2. **Prompt pickup of scheduled materials by borrowers.** Scheduled materials not picked up on the pickup date will be returned to the Library on that date and will be charged the same as a late return.

3. **Replacement of lost or damaged materials.** Audiovisual Library staff check all materials for damage after each use. Materials returned by mail should be insured. Unless otherwise specified, insure each DVD for $200; each model for $100; and each book or audio-CD for $50. Shipments valued at over $400 should be returned by UPS or similar courier service. **Borrowers will be liable for returned uninsured shipments lost in transit.** In the event of loss or damage beyond repair, the Audiovisual Library will invoice the borrower for the full replacement value of the materials or the cost of the repair expense. All materials that come in the shipment must be returned, including study guides and video or audio cases or borrowers will be billed for their replacement. **A packing slip or card is enclosed with each shipment. This should be completed with the number of showings and viewers for each audiovisual item borrowed.**

4. **Copyright compliance.** Borrowed materials cannot be duplicated or televised without prior written permission from the copyright owner. Audiovisuals cannot be shown for commercial purposes, nor can an attendance fee be charged for their showing. Violations of federal copyright law will result in the immediate suspension of Audiovisual Library borrowing privileges and prosecution by the copyright owner can result in financial penalties and/or jail.
5. **_preview prior to showing_. Borrowers are responsible for selecting media appropriate for their audiences. Media should be previewed prior to showing.

6. **Privacy notification_. With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. Go to [www.dshs.texas.gov/notice-privacy-practices](http://www.dshs.texas.gov/notice-privacy-practices) for more information about privacy notification. (Reference: Government Code, Section 552.021, 552.023, 559.003, and 559.004)

_I acknowledge financial responsibility to the State of Texas should items borrowed be lost, stolen, or damaged from the date I receive the items until the materials have been received in the Library. I have read and agree to the terms in the Statement of Responsibility above._

Please complete the information below, print, sign, and send to the Audiovisual Library.

<table>
<thead>
<tr>
<th>Your Printed Name</th>
<th>Your Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organization</th>
<th>Business Phone Number</th>
<th>Fax Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Your Signature is Required

Email

Date

Please check any/all that apply to you or your organization

<table>
<thead>
<tr>
<th>Early Childhood Intervention</th>
<th>DSHS Library</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rehabilitation Services</td>
<td></td>
</tr>
</tbody>
</table>

___ ECI: Family
___ ECI: Program
___ ECI: State
___ College/University
___ Child Care Provider
___ Early Head Start
___ Rehabilitation Practitioner
___ Person, Family, or Friend with Disability
___ Other Agency

___ Public School
___ Private School
___ Other Educational Group
___ Church or Religious Organization
___ Community or Civic Group
___ DSHS Employee
___ Local Health Department
___ Hospital
___ Nursing Home
___ Mental Health/Substance Abuse Organization
___ Other Medical/EMS/Physician/Dentist/Etc.
___ Prison/Detention Center
___ Law Enforcement Agency
___ Fire Department
___ Other State Agency (non-DSHS)
___ Federal Government
___ County Government/Other Regional Agencies
___ City Government
___ Private Business or Industry
___ Individual