EXHIBIT "A" AMENDMENT TERMS

A Subscribing LEA, by its signature below, accepts the terms and conditions of this Amendment. For purposes of this Amendment, references to LEA shall mean and include the Subscribing LEA. The Subscribing LEA's individual information is contained below. The Subscribing LEA and the Provider shall therefore be bound by the same terms and conditions of this Amendment with respect to its General Offer of Privacy Terms.

BY:	Date:	
Printed Name:	Title/Position:	
SCHOOL DISTRICT NAME: DESIGNATED REPRESENTATIVE OF LI	EA:	
NameTitle		
Address Telephone Number		
Email		
COUNTY OF LEA:		

Date: 2023-10-23 By: Katie Hopp

Printed Name: Katie Hopp Title/Position: Instructional Technologist

SCHOOL DISTRICT NAME: Gill-Montague School District

DESIGNATED REPRESENTATIVE OF LEA

Name: Tina Mahaney

Title: <u>Director of Technology</u>
Address: <u>35 Crocker Ave Turners Falls, MA</u>
Telephone Number: <u>4138637510</u>

Email: tina.mahaney@gmrsd.org

COUNTY OF LEA: