

PEASE PUBLIC LIBRARY
VIRTUAL REALITY GLASSES POLICY

VR Glasses circulate for a period of one week.

VR Glasses incur a late fee of \$1.00 per day, not to exceed \$10.00.

- Use Only in A Safe Environment: The VR Glasses produce an immersive virtual reality experience that completely blocks your view of your actual surroundings. For the safest experience always remain seated when using the VR Glasses. A swivel or computer-type chair works best. Be sure that you are not near other people, objects, stairs, balconies, windows, furniture, or other items that you can bump into or knock down when using the VR Glasses. Do not handle sharp or dangerous objects while using the VR Glasses.
- VR Glasses are not for use by children under age 13 or without adult supervision.
- Do not leave VR Glasses in direct sunlight.
- If you have had or could be prone to seizures, consult a doctor before using VR Glasses.
- The borrower assumes all risk of illness or injury associated with the use of VR Glasses.
- Never wear the VR Glasses in situations that require attention, such as walking, bicycling, or driving. Do not drive or operate heavy machinery immediately after using VR Glasses if you feel impaired or disoriented.
- Make sure the VR Glasses are level and secured comfortably on your head, and that you see a single, clear image.
- Allow your body to adjust to the VR Glasses; use for only a few minutes at a time at first, and gradually increase as you grow accustomed to virtual reality. Looking around when first entering virtual reality can help you adjust to any small differences between your real-world movements and the resulting virtual reality experience.
- Do not use the VR Glasses while in a moving vehicle such as a car, bus, or train, as this can increase your susceptibility to adverse symptoms.
- Take frequent breaks while using VR Glasses. If you experience nausea, discomfort, eye strain, or disorientation, immediately discontinue using them.

My signature below indicates that I have read this information. I acknowledge that I am responsible for any loss, damage, or theft of these glasses while checked out to me.

Signature:

Date:
