



Seesaw Learning, Inc.  
548 Market Street  
PMB 98963  
San Francisco, CA 94104 US  
Billing: ar@seesaw.me

Bill To  
Boals Elementary School  
2035 Jaguar Dr  
Frisco Texas 75033

End User  
Frisco Independent School District

Contract Summary	
Order Form Number: Q-51852	Payment Terms: Net 30
Expiration Date: September 30, 2025	Billing Frequency: Annual
Contract Start Date: September 1, 2025	Contract End Date: August 31, 2028
Contract Subscription Term: 36.0 months	
Contract Notes: 3 year renewal discount included. To be paid annually.	Grand Total: USD 411,750.00
9/1/2025: Invoice amount \$137,250	
9/1/2026: Invoice amount \$137,250	
9/1/2027: Invoice amount \$137,250	

Group Name	Description	Net Total
Seesaw Instruction and Insights - Year 1	Includes access to Seesaw Instruction and Insights for all 44 campuses and 5 virtual PL sessions to be used throughout the year.	USD 137,250.00
Seesaw Instruction and Insights - Year 2	Includes access to Seesaw Instruction and Insights for all 44 campuses and 5 virtual PL sessions to be used throughout the year.	USD 137,250.00
Seesaw Instruction and Insights - Year 3	Includes access to Seesaw Instruction and Insights for all 44 campuses and 5 virtual PL sessions to be used throughout the year.	USD 137,250.00
<b>Total:</b>		USD 411,750.00

For more information on funding resources, please review our [Funding Guide](#).

### Key Contacts

#### Admin Sponsor

Decided to purchase (or renew) Seesaw. Will be included in conversations about our partnership progress

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Seesaw Lead

Responsible for Seesaw training and adoption. Main Seesaw point of contact throughout the contract

Name: \_\_\_\_\_ Email: \_\_\_\_\_



Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**Tech Lead (Who can help set up your school?)**

Lead for Seesaw's technical implementation. Point of contact for technical issues or updates.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**Billing Contact - Accounts Payable (Who will pay the invoice?)**

Receives invoices. Point of contact on payment-related matters.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**School Address**

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip/Post Code: \_\_\_\_\_

**Purchase Order Information**

PO Number  
(if  
required): \_\_\_\_\_



**Tax Information**

Is your school or district tax exempt?

\_\_\_\_\_  
If yes, please provide your tax ID  
number  
\_\_\_\_\_

**Terms and Conditions**

Upon signing by Customer and submission to

<https://web.seesaw.me/>

or your sales representative, this Order Form shall become legally binding unless this Order Form is rejected by Seesaw Learning, Inc. for any of the following reasons: (1) the signatory below does not have the authority to bind Customer to this Order Form, (2) changes have been made to this Order Form (other than completion of the purchase order information and the signature block), or (3) the requested purchase order information or signature is incomplete or does not match our records or the rest of this Order Form.

Sales and use tax, if applicable, will be shown on your invoice. Tax exempt customers will be asked to provide proof of exemption. Total amount does not include sales/value added/applicable withholding taxes as required by local jurisdiction. If Seesaw is responsible for collecting and remitting taxes, the taxes will be invoiced to customer, unless customer provides Seesaw with a valid tax exemption certificate authorized by the appropriate taxing authority.

This Order Form is governed by the terms of the Seesaw Learning, Inc. Terms of Service (“Terms”) found

<https://seesaw.com/terms-of-service>

unless (i) Customer has a written Terms of Service executed by Seesaw Learning, Inc. for the Services, in which case such written terms of service will govern or (ii) otherwise set forth herein. By signing below, the parties agree to be bound by the Terms

**Customer**

Company: \_\_\_\_\_

Signature: \_\_\_\_\_

Name \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Email: \_\_\_\_\_

**Seesaw Learning, Inc.**

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_