

## Access Badge Order Form

Parent/Guardian Name: \_\_\_\_\_

# of Access Badges Ordered: \_\_\_\_\_

Money Enclosed: \$\_\_\_\_\_ **OR** Bill Account: \$\_\_\_\_\_

I have read and understand the following:

1. The cost of Access Badges are \$10.00 each
2. If I lose or misplace an Access Badge, I will be required to buy a replacement.
3. I will turn all Access Badges in upon leaving the child development center.
4. The Access Badge is issued to me for my personal use. I am not authorized to loan the Access Badge to another person or use it to gain access to the building outside normal operating hours.
5. I must notify the CDC administration immediately if a badge is lost or stolen so that it may be deactivated.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

### Office Use Only

Date Form Received: \_\_\_\_\_

Payment Collected/Billed: ☐ Yes ☐ No

Fob/Access Badge # Assigned: \_\_\_\_\_

Date Fob/Access Badge Issued: \_\_\_\_\_

Class Assignment: \_\_\_\_\_

Building Assignment: \_\_\_\_\_

