

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 another for \$10.00 and I forfeit the eligibility of the \$5.00 refund for the lost or misplaced access badge.
3. I will turn all Access Badges in upon leaving the child development center for a refund of \$5.00 for each badge.
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: _____

