

# EXTENDED DAY PROGRAM

## Finger Scan Permission Form



Child/Children's Names: \_\_\_\_\_

I give permission for my child to be checked-in or checked-out of the Extended Day Program by having his/her finger scanned at the Extended Day Check-In Station.

\_\_\_\_\_

Parent's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Parent's Name (please print)