



CONSENT FORM FOR THE USE OF BIOMETRIC INFORMATION IN SCHOOLS



Please complete this form if you agree to the taking and using of information from your child's finger by Pembrokeshire County Council's Catering Services as part of an automated biometric recognition system. This information will be used for the purpose of paying for food in the canteen at the school.

In signing this form, you are authorising the Catering Service to use your child's biometric information for this purpose until he / she either leaves the school or ceases to use the system. If you wish to withdraw your consent at any time, this should be done in writing and sent to the following address:

**Catering Services, Pembrokeshire County Council,
Freemans Way, Haverfordwest, SA61 1TP**

Having read guidance provided to me, I give consent to information from the fingerprint of my child being taken and used by Catering Services for use as part of an automated biometric recognition system for the sole purpose of purchasing school meals.

	Child 1	Child 2	Child 3
Name of child:			
Date of birth:			
Tutor group:			

I understand that I can withdraw this consent at any time in writing and revert to purchasing meals using the cashless card.

Name of parent: _____

Signature: _____ Date: _____

Please complete this form and return to: Catering Services, Pembrokeshire County Council, Freemans Way, Haverfordwest, SA61 1TP (pre-paid envelope enclosed).