



Sir Graham Balfour School

Member of Sir Graham Balfour Multi-Academy Trust

CONSENT FORM FOR USE OF BIOMETRIC INFORMATION IN SIR GRAHAM BALFOUR SCHOOL

Please complete this form if you consent to your child using biometric systems until he/she leaves the school.

Once your child ceases to use the biometric recognition system, their biometric information will be securely and permanently deleted by the school.

Student Name: **House Group:** **Year Group:**

I give consent to the school for the biometrics of my child to be used by Sir Graham Balfour for use as part of the cashless catering system.

I do not give consent to the school for the biometrics of my child to be used by Sir Graham Balfour for use as part of the cashless catering system.

I understand that I can withdraw this consent at any time in writing.

Name of Parent: **Signature:**

Date:

Please return this form to Finance by 19th October.