## Child Safety Fingerprint I.D. Form

|  | घWกHLT | XEaN17 | 3700\|17 | అNI 7 | \% 7 \% |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | R.tHUME | f. INDEX | R. MIDLE | R. RINC | R.LITTLE |

## PLACE A RECENT PHOTO HERE. <br> (Update Yearly)

LAST NAME
FIRST NAME
MIDDLE NAME
DATE OF BIRTH__

| SEX | RACE | HEIGHT | WEIGHT |
| :---: | :---: | :---: | :---: |
| BLOOD TYPE |  |  |  |
| EYE COLOR | HAIR COLOR |  |  |

## INSTRUCTIONS:

1. Using a stamp pad (found in many supermarket or stationery stores), hold your child's finger rigid and place lightly on pad. After applying ink, transfer lightly to chart.
2. Remove ink from fingers with soap and water after chart is completed.
3. STORE THIS FORM IN A SAFE PLACE.
