

SCRIP Enrollment Form 2024-2025 School Year

*** IMPORTANT: Please sign & return this form. (A new form must be completed and sent in each school year)

Parent Name		Phone		
(Last)	(First)			
Address				
City		Zip Code		
e-mail address				
Child's name	Grade	Child's name	Grade	
Please credit 50% of	f my SCRIP purchases to	o (select one):		
The scho	ol's general fund			
My family	/'s tuition account			
Designate	ed family's tuition accour	nt:(Family name)		

Permission for child delivery of Scrip and waiver of claim for the 2022-2023 school year

If I indicate on the Scrip order form that I wish my order to be delivered with my child through "backpack mail", I understand that my child will be responsible for the safe transport of the Scrip from school to my home and certify that I have discussed the responsibilities associated with the transport of the Scrip with my child. I further understand that I have the option of personally picking up my Scrip orders from the parish/school rather than having my child transport it. I agree that once the school delivers the Scrip to my child that the parish/school is not responsible for any Scrip which is lost, stolen or misplaced. I hereby waive any right of recovery that I may have against the parish/school for Scrip which is lost, stolen or misplaced after it is given to my child.

I understand how SCRIP works and I understand that participation in this program is voluntary.

Signature: _____