

2006-2007 Scrip Registration Form

St. Mary Immaculate Conception School

Please complete the entire form and return it with your first order.

Family Profile

Name:	Phone:	
Street Address:		
City:	State:	Zip:
Email Address:		

Students Attending St. Mary School:

Name:	Grade:	Check if it is okay to send scrip home with this student <input type="checkbox"/>
Name:	Grade:	Check if it is okay to send scrip home with this student <input type="checkbox"/>
Name:	Grade:	Check if it is okay to send scrip home with this student <input type="checkbox"/>
Name:	Grade:	Check if it is okay to send scrip home with this student <input type="checkbox"/>

Rebate Information:

You have the option of receiving a rebate for 50% of the scrip income your orders generate. The other 50% of scrip income will be given to either the church or school as you designate. When a rebate is not requested, 100% of the income will be directed to the church or school.

- I would like to receive 50% of the income in a rebate, and for the other 50% to be donated to St. Mary Church
- I would like to receive 50% of the income in a rebate, and for the other 50% to be donated to St. Mary School
- I would like 100% of the scrip income to be donated to St. Mary Church
- I would like 100% of the scrip income to be donated to St. Mary School

Delivery Option:

<input type="checkbox"/> I prefer to pick up my scrip order after mass. <input type="checkbox"/> I prefer to pick up my scrip order from the church office during business hours. <input type="checkbox"/> Please send home scrip orders with the child(ren) designated above.*	<p>*A signature is required if you choose to send scrip home with your child(ren). Certificates will not be sent home if you do not include this signed waiver with your first order.</p> <p>I AUTHORIZE ST. MARY IMMACULATE CONCEPTION SCHOOL TO RELEASE MY SCRIP CERTIFICATES TO THE CHILD(REN) CHECKED ABOVE. I WILL NOT HOLD ST. MARY IMMACULATE CONCEPTION SCHOOL OR MEMBERS OF THE SCRIP COMMITTEE RESPONSIBLE FOR ANY LOST OR MISPLACED CERTIFICATES.</p>
Parent's Signature:	Date:

I have read, understand and will abide by the policies of the scrip program.

Signature: _____ Date: _____