

SCHS \$CRIP Registration Form

Registrant Name _____

Address _____

Phone _____

Current Family Future Family - Year you will have children at SCHS _____

There is a one time \$5.00 registration fee and you do not need to fill out a new form each year unless your percentages are changing.

Please direct my rebate to:

_____ % Tuition Assistance Program

_____ % My personal tuition account Account # _____

_____ % Tuition account of (1) _____

_____ % Tuition account of (2) _____

_____ % Tuition account of (3) _____

Is any of this confidential? If so, which ones? (1) (2) (3)

We have read, understand and will abide by the general policies of the SCHS SCRIP program.

Signature _____ Date _____

DISCLAIMER OF RESPONSIBILITY

Complete this section if your certificates will be brought home by someone other than the adult on the account or mailed home.

I (we) authorize the SCRIP Committee to release my SCRIP certificates to my child, another adult or mailed if I provide a self-addressed, stamped envelope. I will not hold SCHS or the SCRIP Committee responsible for any lost, stolen or misplaced certificates as a result of the pick-up person's action or the result of postal delivery.

Pick-up person's name _____

Participant's signature _____ Date _____

Reminder: Did you enclose your \$5 registration fee?

