

Enrollment Form

Shenango Valley Catholic School System Scrip Program

Program rules and guidelines

- 1) Each family will be provided a unique customer ID number. This number must appear on all orders you submit to ensure your purchases are accurately recorded.
- 2) All certificate orders must be accompanied by a check or money order made payable to SVCSS, or credit card. Please do not send cash. Scrip certificate payments are not tax deductible because you receive dollar for dollar value.
- 3) If your check is returned because of non-sufficient funds (NSF), you will be charged a \$15 fee payable to SVCSS. After two NSF checks are tendered on your account, your scrip ordering privileges will be limited to money order only.
- 4) Once each quarter, the Scrip committee will provide a summary of each participating family's purchases.
- 5) Scrip certificates are purchased on your behalf, and are not returnable.
- 6) When you pickup your scrip certificates, open your order and verify its accuracy. Your signature on the Weekly Order Pickup List indicates you have received your order in its entirety. In the unlikely event, you should find a discrepancy in your scrip order, please contact the Business Office within 24 hours.
- 7) Scrip certificates are the same as cash, and should be handled accordingly. SVCSS will not be responsible for certificates that are lost, stolen, or misplaced while in your possession.
- 8) You must sign a WAIVER OF RESPONSIBILITY form before certificates will be released to your child. These forms will be kept on file. SVCSS accepts no responsibility for certificates delivered in this manner.

Yes! I am ready to participate in the SVCSS Scrip Program

First Name	Last Name	
Street Address		
City	State	Zip
Phone	Email	

I have read and understand the policies and guidelines listed above, and I agree to abide by these policies

Signature

Date

WAIVER OF RESPONSIBILITY

I give permission to have my Scrip certificate(s) sent home with my child _____

Child's name

Signature

Date

YOU MAY DIRECT YOUR SCRIP EARNINGS TO ONE OF THE FOLLOWING:

School Tuition/Student(s) Name _____

Family Phone _____

School General Fund _____

Tuition Assistance Fund _____