**Holy Family School Scrip Program Agreement Form** rev. 03.2018

*----This form must be returned to Holy Family School before orders will be credited per this agreement----*

The Scrip you purchase through our program generates automatic rebates from the participating stores. These
rebates are earned by the purchaser and can be assigned as gifts to the school for operating funds.

√ Please Check one:
\_\_\_\_\_\_ I am a parent/guardian who has children enrolled at Holy Family School
\_\_\_\_\_\_ I do not have children attending Holy Family School, but I am a Parish Member
\_\_\_\_\_\_ I do not have children attending Holy Family School, but I have grandchildren/loved ones enrolled at HFS

First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I /we voluntarily agree to apply our Scrip program automatic rebates as designated below:

**50% of the rebate will automatically be contributed to Holy Family School to use for general operating funds.**

Allocate the remaining 50% as follows:

\_\_\_\_\_\_\_\_ % to OUR HFS tuition account. Name & grade of oldest student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ % to a different family’s HFS tuition account. Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ % to a different family’s HFS tuition account. Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_ % to a different family’s HFS tuition account. Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**100% Total**

Please sign and date below to indicate your full acknowledgement of this agreement. Thank you!!

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***--Over for more information--***

**Other Important Program Information:**

1. The Holy Family School Scrip program will distribute the accumulated rebate credit directly to the specified accounts twice per year.

Distribution #1: Once in January covering purchases ordered and received from July 1 through December 31st. Distribution #2: The second distribution will be in early July and cover purchases ordered and received from January 1st through June 30th.

2. Scrip gift cards are not returnable. All sales are final.

3. You agree to indemnify Holy Family School against any loss incurred in connection with the delivery method of the scrip cards, or if there are insufficient funds in your account to cover the checks or ACH transfers you issue to pay for your scrip. We make no representations or warranties of any kind with respect to the scrip.

4. This agreement continues unless replaced by another and can be terminated by either party with 30 days advance notice to the other.

5. Any school family unused rebate credits remaining on a tuition account at the end of the school year will be carried forward to the next school year’s tuition.

6. School families who will not be returning the next year (i.e., due to graduating) will need to complete a new Scrip Tuition Credit Program form to indicate what family the other 50% rebate should be attributed to effective January 1st of their student’s 6th grade year. Otherwise, 100% of the rebate will go to Holy Family School.

***For Office Use Only:***

Form entered into the Scrip Computer System by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_