

**2019-20 SCRIP PROGRAM AGREEMENT AND ENROLLMENT FORM
NON-PARENT FORM**

Our Lady of Perpetual Help School (*referred to herein as "we," "us" and "our"*) sponsors a Scrip program which allows you to purchase Scrip. The Scrip you purchase through our program generates rebates from the participating retailers. These rebates can be used as cash back to you, and/or a gift to an OLPH School family, the OLPH Annual Fund, St. Vincent DePaul Society or other specified ministry.

The parties agree as follows:

1. For administering the Scrip program, we will retain 50% of the total rebates received from your Scrip purchases as an administration fee (*NOT deductible by you*).
2. We agree to apply *your portion* of the rebates **totaling \$25.00 or more** as designated below (*please choose one*). Rebates are distributed once a year in June. Rebates totaling less than \$50.00 *will not be split with you* and will instead be retained for the OLPH Annual Fund.

____ Charitable contribution to the **OLPH Annual Fund** (*potentially deductible by you*)

____ Charitable contribution to **St. Vincent de Paul Society** (*potentially deductible by you*)

____ Charitable contribution to **Other Parish Ministry** _____ (**specify**)

____ cash rebate to you (*NOT deductible by you*)

____ donate proceeds to the following OLPH family: _____

You agree to indemnify us against any loss incurred in connection with there being 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. This agreement continues unless replaced by another, and can be terminated by either of us upon advance notice to the other.

Please sign and date below to indicate your acknowledgement of this agreement.

Purchaser's Signature: _____

Date: _____

Printed Name: _____

Address: _____

Family name to issue rebate credits: _____

Home Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

Please send me info on how to place orders online

ACKNOWLEDGED:
OLPH School by: _____ **Date:** _____

I will pick up my orders:

___ In the Church Office OR
___ In the School Office OR
After _____(time) Mass
OR
Please send home with the following student:

Grade: _____

My signature above also acknowledges that OLPH School is not responsible for orders sent home with a student once the order is in that student's possession.