

Account # _____

CHRIST COMMUNITY LUTHERAN SCHOOL SCRIP REGISTRATION FORM**Please complete and return the entire form to participate in the program.**

2020-2021 School Year

Name _____
Last First/Spouse

Address _____

City _____ State _____ Zip _____ Telephone _____

I want my credit to go to the following:

[] _____ For School Tuition credit (your child or another child)

(Child's family name & phone number)

[] Benefit Christ Community Lutheran School Budget

[] Christ Community Lutheran Grant-In-Aid Scholarship Fund

[] Glendale Lutheran Church Scholarship Fund

[] Webster Garden's Lutheran Church Scholarship Fund

[] FUTURE FAMILIES ONLY. Complete if your oldest child is not yet enrolled at CCLS at this time.

Projected date of enrollment (school year): _____

Child's Name: _____

If you have chosen to donate your SCRIP credit, would you like to keep your donation confidential? [] Yes [] No

Where would you like to receive your SCRIP order? (Check only ONE!)

[] I would like to pick up my order at the ELEMENTARY school office.

[] I would like to pick up my order at the MIDDLE SCHOOL office.

[] I would like to pick up my order at PRINCE OF PEACE preschool.

[] I would like to pick up my order at GLENDALE LUTHERAN CHURCH.

[] I would like to pick up my order on Sunday morning at WEBSTER GARDEN'S LUTHERAN CHURCH.

[] I would like my order sent home with my child. I have signed the disclaimer below.

(If you decide to change locations, fill out a new registration form.)

DISCLAIMER: Complete this part **only** if a child is permitted to bring your certificates home. The child will be responsible to pick up the envelope of certificates ordered under your family name. Certificates will not be sent home with the child if you do not return this signed disclaimer.**I AUTHORIZE CHRIST COMMUNITY LUTHERAN SCHOOL TO RELEASE MY SCRIP GIFT CERTIFICATES TO THE CHILD NAMED BELOW. I WILL NOT HOLD CHRIST COMMUNITY LUTHERAN SCHOOL OR THE SCRIP PROGRAM RESPONSIBLE FOR ANY LOST, MISPLACED OR STOLEN CERTIFICATES.**

Child's Name: _____ Child's

Homeroom: _____

Adult's

Signature: _____ Date: _____

Christ Community Lutheran School is aware of boycotts against certain businesses. We respect anyone's wish to honor those boycotts. There are a wide variety of merchants involved in the SCRIP program – each family chooses the merchant's they wish to patronize.

I/We have read, understand, and will abide by the general policies of the Christ Community Lutheran School SCRIP Program. (Unused SCRIP credits have no cash value)

Adult

Signature: _____ Date: _____