

## BOSCO CATHOLIC SCHOOL SYSTEM SCRIP Account Setup and Delivery/Distribution for Tuition Credit Form

Name	Date
Address	
Email	Phone
(If you have students in school, this will aut	irection - for those who do NOT have students in school: omatically go to your tuition credit account. If you are giving but this form to indicate whom the credit goes to.) You can must equal 100%.
Family Name	%
TOTAL	= 100%
*** Online Orders - Delivery Directions send my order with the stude	ections: deliver my shopwithscrip.com order as follows: ent(s) listed below
I will pick up my order at the	DB office (Mon-Fri 7am-3pm)
I will pick up my order at Far	mers State Bank in Gilbertville
PERMISSION FOR STUDENT DELI	VERY OF SCRIP AND WAIVER FORM
	permission to Bosco Catholic School System to deliver my the SCRIP program, to the following student(s)  I understand that
and certify that I have discussed the respor student. I further understand that I have the school or the bank rather than having this s SCRIP to this student that the school is not	safe transport of the SCRIP order from school to my home asibilities associated with the transport of the SCRIP with this option of personally picking up my SCRIP orders from tudent transport it. I agree that once the school delivers the responsible for any SCRIP that is lost, stolen or misplaced. The have against the school for SCRIP that is lost, stolen or
This agreement will remain in effect until the	e school receives updated delivery/distribution information.
	Parent/Guardian/Date