



## SCRIP PROGRAM AGREEMENT

This agreement is made by and between CRISTA Ministries d/b/a King's Schools ("King's") and Purchaser (herein referred to as "you" or "your"). The parties hereby agree as follows:

King's sponsors a scrip program which allows Purchaser to purchase scrip. The scrip you purchase through the program generates rebates from participating retailers. These rebates belong to you, and can be directed for use as: 1) a charitable contribution to the King's Knight Fund, 2) a credit on your tuition and fees account, 3) a credit on the tuition and fees account of another family or 4) a direct cash rebate.

King's agrees to apply the balance of your rebates as designated below (please insert percentages):

\_\_\_\_\_ % as a charitable contribution to King's Annual Fund (please consult your tax advisor regarding deductibility)

\_\_\_\_\_ % as credit on your family's King's tuition and fees account

\_\_\_\_\_ % as credit on \_\_\_\_\_ (insert full name) King's tuition and fees account.

\_\_\_\_\_ % as a cash rebate (Cash rebates are sent out once per quarter to the address printed below.)

King's will provide all required IRS acknowledgements for all charitable contributions through the program.

You hereby agree to indemnify King's 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. King's makes no representations or warranties of any kind with respect to the scrip.

This agreement may be terminated by either party with 60 day's advance notice to the other party.

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

Purchaser's Signature: \_\_\_\_\_  
(On behalf of the marital community)

Purchaser's Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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

\_\_\_\_\_ I will pick up cards at King's. Please note which school office \_\_\_\_\_

**If your child is permitted to bring your gift cards home, please complete the disclaimer on the back of this form.**

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Completed form is required before ordering scrip. Please scan and return via email to King's Scrip Coordinator at [scrip@kingsschools.org](mailto:scrip@kingsschools.org).



**DISCLAIMER:**

Please complete this portion if your child is permitted to bring your gift cards and certificates home. Your child will receive only the envelope of SCRIP ordered under your family account. SCRIP will not be sent home with your child if you do not complete this disclaimer.

I authorize King's Schools to release my SCRIP cards and certificates to my child. I will not hold King's Schools or the volunteers and coordinators responsible for any lost or misplaced SCRIP occurring during the transportation of SCRIP from the school to my home or work place. Further I entrust the responsibility of the certificates with the named student and no other. If this student is relieved of this task and another student should be assigned, I will notify the SCRIP coordinator in writing of these changes immediately.

Student Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_