

# Scrip Release Form 2011-2012

St. James Catholic School  
206 NE Kirby St.  
McMinnville, Oregon 97128

I do hereby grant permission for [student's name(s)]: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

to deliver payment for purchase of Scrip gift cards/certificates (hereinafter referred to as "Scrip") to St. James School and/or take possession of actual Scrip via \_\_\_\_\_'s backpack and deliver them home.  
(preferred student)

I agree that St. James School will not be held liable for lost or stolen Scrip after the certificates are received by any one of the persons listed above. By my signature below, I hereby release and agree to hold harmless St. James School (including its employees, officers, volunteers, and agents) from lost or stolen Scrip.

I entrust the responsibility of the Scrip transactions with the persons listed above and no other. I understand that any changes to persons listed above will require prior written notification, and further, I agree to sign a new Scrip Release Form as requested. Changes will not be valid until the newly signed Scrip Release Form is received by a Scrip Representative at the address listed above.

I also understand that St. James School does not recommend delivery of Scrip to students enrolled in the school's extended care program. If your student is enrolled in the school's extended care program, by your signature below, you assume sole risk for Scrip placed in the above-named student's backpack. I also understand that the school will not allow the above listed student/s to take possession of more than \$200 in Scrip and that the parent should instead make arrangements to pick up any Scrip amount exceeding \$200 in (1) the school office; (2) the parish office; and/or (3) the Scrip office.

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

\_\_\_\_\_ Parent Name (Printed)

\_\_\_\_\_ Date \_\_\_\_\_ Day Time Phone Number

\_\_\_\_\_ Student Signature

\_\_\_\_\_ Student Signature

\_\_\_\_\_ Student Signature