

Enrollment Form – Dakota Christian Scrip Program

Program rules and guidelines

- 1) Each family will use their telephone number as their customer ID number. This number must appear on all orders you submit to ensure your purchases are accurately recorded.
- 2) All certificate orders must be accompanied by a check or money order made payable to Dakota Christian Scrip. Please do not send cash. Scrip certificate payments are not tax deductible because you receive dollar for dollar value.
- 3) If your check is returned because of non-sufficient funds (NSF), you will be charged a \$20 fee payable to Dakota Christian Scrip Program. After two NSF checks are tendered on your account, your scrip ordering privileges will be limited to money order only.
- 4) Semiannually, Dakota Christian School Scrip will provide a summary of each participating family's purchases.
- 5) Scrip certificates are purchased on your behalf, and are not returnable.
- 6) When you pickup your scrip certificates, open your order and verify its accuracy. In the unlikely event you should find a discrepancy in your scrip order, please contact the Dakota Christian Scrip Program coordinator within 7 days.
- 7) Scrip certificates are the same as cash, and should be handled accordingly. Dakota Christian Scrip Program will not be responsible for certificates that are lost, stolen or misplaced while in your possession.
- 8) You must sign a WAIVER OF RESPONSIBILITY form (on the back of this sheet) before certificates will be mailed to you or released with your child. These forms will be kept on file, and Dakota Christian Scrip Program accepts no responsibility for certificates delivered in this manner.
- 9) Prepaid tuition can be transferred to another student's account or the DCHS General Fund. No refunds will be given.

Yes! I'm ready to participate in the Dakota Christian Scrip Program!

| | | |
|----------------|-----------|-----|
| First Name | Last Name | |
| Street Address | | |
| City | State | Zip |
| Phone | | |

I have read and understand the policies and guidelines listed above, and I agree to abide by these policies

Signature

Date

Please direct my earnings to (please check one)

Tuition credit for _____ attending _____
(family) DCHS – NHCS - PCS

Credit to DCHS General Fund

Prepay tuition for _____, _____ attending _____
(family) (Est. student enrollment date) DCHS – NHCS – PCS

Dakota Christian Scrip Program

Dakota Christian Scrip Program
37614 SD Hwy 44
Corsica, SD 57328

Waiver of Responsibility

DISCLAIMER: Complete this part so your child is permitted to bring your certificates home. Your child will receive only the envelope of certificates ordered under your family number. Certificates will not be sent home with your child if you do not include THIS WAIVER with your first order.

| | | |
|---|---------------|-----------------|
| I authorize Dakota Christian Scrip Program to release my scrip gift certificates to my child. I will not hold Dakota Christian Scrip Program, or Dakota Christian School responsible for any lost or misplaced certificates. | | |
| Child's Name | Child's Grade | Child's Teacher |
| Parent's Signature | Date | |