

Holy Name School Scrip Program

Waiver of Responsibility

I _____ give the Holy Name Scrip Program permission to send my Scrip order home with my child, unless otherwise indicated on the order form that I will pick it up in the school office on the designated date. By signing this waiver, I release Holy Name School from any liability if the order is lost or misplaced.

Date: _____

Signature: _____

Please list the child's name you wish to transport your order:

Name _____

Homeroom Number _____

Account Number _____

Holy Name School Scrip Program

Authorization Form

I _____ give the Holy Name Scrip Program permission to substitute the denominations of my Scrip order based on availability. For example, if I order 1 - \$100 Sheetz and Scrip has 4 - \$25 Sheetz cards, I authorize this substitution.

Also, I ask the Scrip Program to fill my order as soon as possible. If an item is not available and on backorder, the item will be ordered the following week and the rest of the order will be sent home.

Date: _____

Signature: _____

Child's Name _____

Homeroom Number _____

Account Number _____