

Troy Christian School
700 South Dorset Road
Troy, OH 45373

SCRIP RELEASE FORM

I do hereby grant permission to _____

Insert name of student (s)

to deliver payment for purchase of SCRIP certificates to Troy Christian School and/or pickup certificates from the school and bring them home or my place of employment.

Also, I agree to understand that Troy Christian School will not be held accountable for any lost or stolen certificates occurring during the transportation of said certificates from the school to my home or work place.

Further, I entrust the responsibility of the SCRIP certificate transaction with the student(s) named above and no other. If, by any chance, this student is relieved of this task and/or another student should be assigned, I will notify the SCRIP coordinator of Troy Christian School in writing of these changes immediately.

Signature of Parent

Signature of Student

Date

Signature of 2nd Student (if necessary)

Signature of 3rd Student (if necessary)