

Family Name \_\_\_\_\_

## Shepherd of the Valley Lutheran School Scrip Program Agreement

Shepherd of the Valley Lutheran School, Inc. (referred to herein as "SVLS", "we", "us" and "our") sponsors a scrip program which allows you to purchase scrip. The scrip you purchase through our program generates rebates from the participating retailers. These rebates can be used as a credit to your tuition account, cash back to you, and/or a gift to the school. The parties agree as follows:

1. Rebates earned will be used in the following ways:

- a. 40% will be retained for running the scrip program (NOT deductible)
- b. \_\_\_\_\_% as a charitable contribution to the school (potentially deductible)
- c. \_\_\_\_\_% as a tuition credit for the following school family: \_\_\_\_\_
- d. \_\_\_\_\_% as a tuition credit for the following school family: \_\_\_\_\_
- e. \_\_\_\_\_% as a tuition credit for the following school family: \_\_\_\_\_
- f. \_\_\_\_\_% as a cash rebate to you (NOT deductible)

**Total: 100%**

Our scrip program distributes the rebates once a year in the month of July. With respect to your charitable contributions, we will provide you with all required acknowledgements under sections 170(f)(8) and 170(f)(7) of the Internal Revenue Code.

You agree to indemnify us 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. We make no representations or warranties of any kind with respect to scrip. This agreement continues unless replaced by another and can be terminated by either of us upon a 60 day's advance notice to the other.

I understand if I choose to have my child/ward transport my scrip order from school that SVLS is not responsible for any scrip which is lost, stolen or misplaced. I hereby waive any right of recovery that I may have against SVLS for scrip which is lost, stolen or misplaced after it is given to my child/ward.

Preferred Location/Method of Delivery:

Mt. Calvary          Bethel          St. Lukes          SVLS Backpack: \_\_\_\_\_  
(Name and grade)

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

Purchaser's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_  
(referred to herein as "you" and "your")

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

ACKNOWLEDGED: Shepherd of the Valley Lutheran School, Inc.

By: \_\_\_\_\_ Date: \_\_\_\_\_