

**T.A.P.S Tuition Assistance Program with Scrip**

**T.A.P.S Agreement and Registration Form**

**\*\*IMPORTANT:** Please sign and return entire form with your first order each school year\*\*

Last Name \_\_\_\_\_ First Names (Both Parents) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_  
 Email \_\_\_\_\_

Bellevue Christian School sponsors a scrip program called T.A.P.S. The scrip you purchase through T.A.P.S. generates cash rebates from participating retailers. These rebates can be applied to a tuition account or designated as a donation to BCS. In consideration of your participation in the scrip program and our desire to make your tuition as affordable as possible, we agree as follows:

- We agree to operate this scrip program on your behalf from such retailers and in such quantities as you designate from time to time.
- As such, we will make advance purchases on your behalf in such quantities and types as are consistent with your and other participants' purchase history.
- To cover our expenses (shipping, supplies, etc.) of operating this program, we will retain a minimal amount from the rebates received from your scrip purchases as an administration fee.
- Percentage rebates available to you after administration fee are listed for each individual retailer on the Scrip Order form.
- We agree to apply your scrip rebates as designated below:

**Please choose ONE of the following:**

- Tuition Account** - Family Name \_\_\_\_\_ & Family ID No. \_\_\_\_\_  
(This choice is NOT considered a charitable contribution to BCS)
- BCS General Operating Fund**  
(You will receive a tax deductible contribution acknowledgement for the calendar year)
- Specific BCS Educational or Athletic Program** \_\_\_\_\_ (Please designate)  
(You will receive a tax deductible contribution acknowledgement for the calendar year)

You agree and acknowledge as follows: (i) no employment or partnership arrangement is created as a result of this agreement; (ii) you are the owner of the scrip purchased on your behalf; (iii) you have limited rights to return the scrip we purchase on your behalf, based on the return policy of our scrip suppliers; (iv) you shall indemnify us against any loss incurred in connection with there being insufficient funds in your account to cover the checks you issue to pay for your scrip; and (v) we make no representations or warranties of any kind with respect to the scrip purchased on your behalf. This agreement can be terminated by either of us upon 60 day's advance notice to the other.

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

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Print Name: \_\_\_\_\_

**DISCLAIMER:**

Complete this portion if your child is permitted to bring your gift cards and certificates home. Your child will receive only the envelope of scrip ordered under your family account. Scrip will not be sent home with your child if you do not include this disclaimer with your first order:

- ❖ I authorize Bellevue Christian School to release my scrip cards & certificates to my child. I will not hold Bellevue Christian School or the volunteers and coordinators responsible for any lost or misplaced scrip occurring during the transportation of said scrip from the school to my home or work place. Further, I entrust the responsibility of the certificates with the named student and no other. If this student is relieved of this task and another student should be assigned, I will notify the Scrip Coordinators in writing of these changes immediately.

Student Name \_\_\_\_\_ Teacher/Grade \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_