

**REGISTRATION FORM**

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

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

LAST

FIRST (OF BOTH PARENTS)

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_@\_\_\_\_\_

The Tuition Assistance Program with Scrip (TAPS) enables families to direct the funds earned through buying scrip. In order to receive a tuition credit, your scrip purchases must generate a minimum profit of \$50 per year. All amounts under \$50 will be deposited in the financial aid fund.

**Please choose ONE of the following:**

\_\_\_\_\_ Your Tuition Account - Family ID No. \_\_\_\_\_

\_\_\_\_\_ Other BCS Family

(Name) \_\_\_\_\_

\_\_\_\_\_ General Financial Aid

❖ The Scrip fiscal year is January 1 – December 31. Credits will be posted and appear on your January statement.

\*\*\*\*\*

**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 certificates to my child. I will not hold Bellevue Christian School or the volunteers and coordinators responsible for any lost or misplaced certificates occurring during the transportation of said certificates 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 by any chance 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 \_\_\_\_/\_\_\_\_/\_\_\_\_