

**St. Mary School Scrip Distribution Selection  
(Please return this signed form)**

**I WILL PICK-UP MY SCRIP ORDER IN PERSON**

I will be picking my Scrip Order Packet from the school office on Fridays by 3:15pm. If Friday is a holiday, other options will be provided.

**PLEASE SEND HOME MY SCRIP ORDER WITH MY CHILD**

In signing this waiver, I agree to be a participant in the St. Mary SCRIP Backpack Program. I understand that once the SCRIP order envelope containing merchant certificates is delivered to my child, I assume all the responsibility. In registering for this program and choosing the backpack distribution method, I am aware that there are possible consequences. Scrip certificates have a cash equivalency, and if lost or stolen, cannot be replaced, traced or refunded. In deciding to participate in this program, I will consider the age and maturity of my child, how he/she gets home from school and potential situations where the backpack is unattended (after school programs, sporting events, etc.). I will not hold St. Mary School, St. Mary Parish, the St. Mary SCRIP Program or any of their employees or volunteers responsible for lost, misplaced, or stolen certificates. If the student is absent the day of distribution the SCRIP order envelope will be held in the office for pickup. If not picked up it will be sent home with indicated Responsible Student the next day they are in attendance.

RESPONSIBLE STUDENT NAME: \_\_\_\_\_

TEACHER NAME \_\_\_\_\_

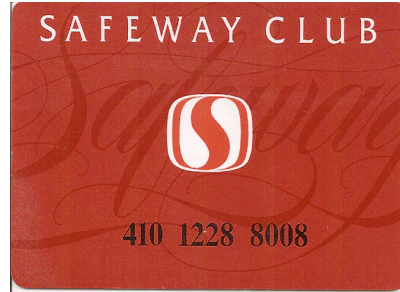
GRADE \_\_\_\_\_

1. When receiving your SCRIP order envelope containing your order, whether picking up or receiving via the St. Mary SCRIP Backpack Program, you agree to open immediately and verify its accuracy.
2. **ALL DISCREPANCIES MUST BE REPORTED TO THE SCRIP COORDINATOR WITHIN 48 HOURS.**
3. SCRIP orders will be distributed in the SCRIP Order Packet Envelopes **ONLY**. No SCRIP Certificate Orders will be distributed without the SCRIP Order Packet Envelope. If we have not received your SCRIP Order Packet Envelope by Thursday AM, your SCRIP certificates will be held until your envelope is returned. **LOST SCRIP ORDER ENVELOPES MAY REQUIRE PARTICIPANTS TO PAY A \$5.00 REPACEMENT FEE.**

**AGREEMENT:** *I understand SCRIP Certificates are the same as cash, and I will handle accordingly. St. Mary School, St. Mary Parish, the St. Mary SCRIP program or any of their employees or volunteers are NOT responsible for lost certificates, misplaced certificates, or stolen certificates after being released to me or to my designated Responsible Student and in our possession.*

**PRINTED NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



Dear St. Mary Families,

If you would like to receive credit for your Raley's/Nob Hill Quality of Life purchases, please fill out the information below. The only way we are able to track your contributions to St. Mary School for the Scrip program is by the number on the back of the card. Please enter the entire number (including the 4 at the beginning) and the name on the account. **This form must be returned to the school office with all other paperwork. If we do not receive this information we will be unable to count your Raley's/Nob Hill Quality of Life and eScrip/Safeway contributions towards your mandatory \$200.00 Scrip obligation.**

For Safeway/eScrip, please write down the name that is used for the Safeway program. Safeway/eScrip tracks purchases by last name.

**St. Mary Family Name**

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**Raley's/Nob Hill card number #**

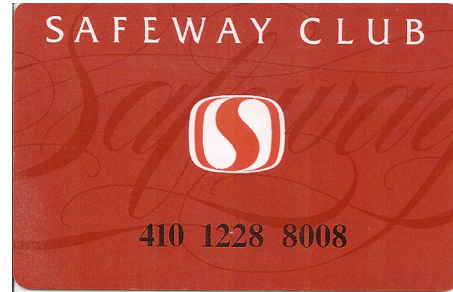
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**Safeway Card/eScrip Family Name**

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If you do not currently have a Nob Hill Quality of Life card and would like one, please go to the school office and school staff will be happy to give you a card. Please have your extended family join too!

Thank you,  
Kristina Ryan  
St. Mary School Scrip Coordinator



If you have family members who are also contributing towards your \$200 mandatory scrip obligation, we need their names and Nob Hill- Quality of Life Card numbers so we can track their contributions. Thank you

SCHOOL FAMILY NAME  
(Where contributions will be allocated) \_\_\_\_\_

EXTENDED FAMILY NAME \_\_\_\_\_

CARD NUMBER (NOB HILL ONLY) \_\_\_\_\_

SAFeway TRACKS BY LAST NAME  
.....

EXTENDED FAMILY NAME \_\_\_\_\_

CARD NUMBER (NOB HILL ONLY) \_\_\_\_\_

SAFeway TRACKS BY LAST NAME  
.....

EXTENDED FAMILY NAME \_\_\_\_\_

CARD NUMBER (NOB HILL ONLY) \_\_\_\_\_

SAFeway TRACKS BY LAST NAME  
.....

EXTENDED FAMILY NAME \_\_\_\_\_

CARD NUMBER (NOB HILL ONLY) \_\_\_\_\_

**This form must be returned to the school office with all other paperwork. If we do not receive this information we will be unable to count your extended families' contributions towards your \$200 Scrip obligation.**