

ST. BONIFACE PARISH SCRIP PURCHASE AGREEMENT

St. Boniface Parish (referred to herein as "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. Seventy percent (70%) of the rebate can be used as a credit towards your tuition, gift to St. Boniface, or cash back to you. Thirty percent (30%) of the rebate will be retained by St. Boniface for fundraising.

First Name(s) _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____ Other Phone: _____

The parties agree rebates will be applied quarterly to accommodate the current year's tuition payment schedule which is Nov, Feb, May, Aug.

We agree to apply the balance of your rebate from your Scrip purchases by the percentages you designate below:

_____ % as a charitable contribution to St. Boniface Parish

_____ % as a charitable contribution to Faith Formation Program

_____ % as a charitable contribution to Guardian Angel Fund (Day School Tuition Assistance)

_____ % credit to _____ family (circle one) day school tuition / faith formation tuition

_____ % credit to _____ family (circle one) day school tuition / faith formation tuition

_____ % as a cash rebate to you.

= **70%** (Percentages above add together must total 70%)

This election is effective upon receipt, and will continue until replaced with another election form on behalf of either party.

With respect to your charitable contributions, we will provide you with all required acknowledgements under sections 170(f) (8) and 170(f) (17) of the Internal Revenue Code.

You agree to indemnify St. Boniface 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 the Scrip.

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

Purchaser's Signature: _____ Date: _____
(Referred to herein as "you" and "your")

Printed Name: _____

Return the completed form to School, the Rectory, or email to scrip@stbonifacewi.org

****School Parents Complete Backside**

SCHOOL FAMILIES COMPLETE THIS SECTION

Please choose a delivery method for your Scrip orders:

A. _____ **KID MAIL:**

By signing below, Scrip gift cards will be delivered to St. Boniface student:

(first and last name)

You understand that the child named above will be responsible for the safe transport of the Scrip gift cards from school to home. You have discussed the responsibility with the child in regards to the transport of the Scrip in their possession. You agree once the Scrip gift cards are given to the child, that the school is not responsible for any Scrip that is lost, stolen, or misplaced, or for the discovery of its location.

B. _____ **PARENT PICKUP:**

You will personally pick up the Scrip from the school office.

The parties also agree:

- 1. If your family is delinquent in day school or faith formation tuition, rebates will be applied to cure the outstanding balances first.
- 2. If you wish to have the rebate credit issued to a Catholic high school you will be attending next year, please contact us.
- 3. St. Boniface graduates with a rebate credit can have it applied to faith formation the following year, or be issued a cash rebate.
- 4. If you elect to credit tuition, and the tuition is paid in full for this school year, we will apply the rebate to the next school year.
- 5. If the purchase agreement is not received, the rebate will default as a gift to the Parish.

Purchaser's Signature: _____ Date: _____
(Referred to herein as "you" and "your")

Printed Name: _____