

PRESENTATION SCHOOL SCRIP PROGRAM

Authorization Form

I give my permission to have my Scrip order sent home with my child, _____, who is in the _____ grade. I understand my Scrip order will be delivered to my child when it is filled. Any backorders will be delivered to my child when it is filled. I am aware that the Scrip certificates are fully negotiable, and I accept full responsibility for my order after it is delivered to my child.

I will notify the Scrip Director, in writing, when I want to discontinue sending my Scrip orders home with the above named child.

Dated _____

Parent's Name Printed

Telephone Number

Parent's Signature