

BIRCHWOOD SCHOOL SCRIP PROGRAM

Participation Information and Standing Order Form

Family Name/Grade(s): _____

Valid E-Mail Address: _____

- **Yes! We will participate in the scrip program this year.**
- **Yes! We will establish a standing order as detailed below.**
- **Please accept the enclosed contribution to the scrip program (net profits benefit Birchwood School)**
 Amount \$_____. Enclosed is my check number _____ payable to Birchwood School Parents Committee.

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Birchwood School Parents Committee Scrip Program

Standing Order Form

	Merchant/Vendor name	Dollar amount per period	Frequency (weekly, monthly, etc.)
Example Only	Giant Eagle	\$200	Monthly
	Speedway	\$100	Monthly

I understand that this standing order will become effective immediately upon the receipt by the Parents Committee and will remain in effect until the end of the 2009-2010 School year unless amended or cancelled in writing. Further, I understand that payment is due prior to delivery of the Scrip to me.

Authorized Signature

Date

Please return this form as soon as possible to Paula Hendryx, C/O Birchwood School as soon as possible.

Thank you for your support of this great fundraising program for our school!