

Seton Catholic School's Scrip-Loaves & Fishes Program
SCRIP PROGRAM AGREEMENT-Grades K-8

Seton Catholic School (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. These rebates can be used as a credit to your tuition account, cash back to you, and/or a gift to the school. The parties agree as follows:

1. Rebates earned will be used in the following ways:

The first \$250 will be retained to offset the family fundraising fee (NOT deductible). After that:

- a) _____% as a charitable contribution to the school (potentially deductible)
- b) _____% as tuition credit for the following school family: _____
- c) _____% as tuition credit for the following school family: _____
- d) _____% as tuition credit for the following school family: _____
- e) _____% as tuition credit for the following school family: _____
- f) _____% as a cash rebate to you (NOT deductible)

Total: 100%

Our scrip program distributes the rebates four times per year: April 15 (January-March), July 15 (April-June), October 15 (July-September), and January 15 (October-December).

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 us 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. This agreement continues unless replaced by another, and can be terminated by either of us upon 60 day's advance notice to the other.

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

Purchaser's Signature: _____

Printed Name: _____ Date: _____

(referred to herein as "you" and "your")

Address: _____

ACKNOWLEDGED: Seton Catholic School's Scrip-Loaves & Fishes Program

By: _____ Date: _____

[Authorized Person's Name & Title]