

Saint Margaret School
Home and School Association SCRIP Program
SCRIP Credit Redemption Form

(Print out this form and fill in by hand. Turn in form with credit slips attached to school office or rectory office.)

Family Last Name _____ Date _____

Mailing address _____

Email _____

Phone _____ Circle: Landline Mobile

Total credits to be redeemed (staple white credit slips to the back of this form) \$ _____ (\$50 minimum unless the date on this form is in January or May)

Credits to be applied to:

_____ Tuition at Saint Margaret School. SMART family name: _____

_____ CARES or Extended Day fees at Saint Margaret School. (Give this completed form to Donna)

_____ PREP fees at Saint Margaret Church for _____

_____ donation to the annual Teacher Bonus collection at Saint Margaret School.*

_____ donation to Saint Margaret School.*

_____ donation to Saint Margaret Church.*

_____ with prior approval of the Parish Business Manager, to tuition at certain local Catholic High Schools. Call Cliff at 610-664-3770 to check if your high school qualifies. High School: _____

Student name: _____ Student ID#: _____

* Check here ___ if you would like a donation receipt.

For Rectory Office Use:

Family Name _____

Credit applied to: School Account: _____ Date: _____

Church Account: _____ Date: _____

Donation receipt sent. Date _____