

OLV/JFK Victory Voucher Rebate Program Enrollment Form

Name	Phone
Address	
City/State/Zip	Email

Please direct my 2% Victory Voucher Credit to:

- | | |
|--|--|
| <input type="checkbox"/> JFK Catholic School Tuition | <input type="checkbox"/> OLV Foundation |
| <input type="checkbox"/> Youth Ministry Programming | <input type="checkbox"/> OLV Building Fund |
| <input type="checkbox"/> OLV Faith Formation Fees | |

If you do not have children enrolled in John F. Kennedy Catholic School or the Faith Formation Program, you may direct tuition credit to a current student. Please indicate the family name you would like to apply your credit to:

Family Name: _____

The above election remains in force until such time that designated student(s) are no longer enrolled in the selected program. A new form may be submitted to change your election.

Credit is earned on total purchases made from July 1 through June 30 and is applied the next school/fiscal year. Credits will be issued prior to the start of the school year.

I agree and acknowledge as follows: (i) no employment or partnership arrangement is created as a result of our relationship; (ii) I am the owner of the scrip purchased on my behalf; (iii) I have limited rights to return the scrip purchased on my behalf, based upon the return policy of the scrip supplier; (iv) I shall indemnify OLV/JFK against any loss incurred in connection with there being insufficient funds in my account to cover checks issued to purchase scrip; (v) OLV/JFK makes no representations or warranties of any kind with respect to the scrip purchased on my behalf. This agreement may be terminated by either party upon written notice to the other.

Signature _____ Date _____

Book Bag DISCLAIMER/RELEASE:

I authorize the OLV/JFK Victory Voucher Program to release gift cards (SCRIP) to my youngest child in attendance. I will not hold Our Lady of Victory or John F. Kennedy Catholic School responsible for any lost or misplaced vouchers.

Signature _____ Date _____