

VALLEY CHRISTIAN HIGH SCHOOL
T.R.I.P. (Tuition Reduction Incentive Program)
Registration Form

Please sign and return entire form prior to, or with, your first order

1. Enrollment Group: **Please check one to whom your rebates should be directed:**

- Your currently enrolled VCHS student
- Your future VCHS student
- Directed to a another current or future VCHS student
- Directed to the VCHS Scholarship Fund for Tuition Aid

2. Essential Information:

Your Name: _____ Student or Fund to be Credited: _____

Is this student your child? Current Grade of Student: _____ Entrance Year: _____

Your Address: _____ City: _____ St: _____ Zip: _____

Telephone: Home: _____ Cell: _____

E-mail: _____

3. Pick-up information:

If you will not be picking up your certificates in person, please list the people you authorize to pick up and count your TRIP certificates. You may designate a student or any other responsible party.

I authorize TRIP volunteers to release my gift certificates to the person(s) named below. I will not hold Valley Christian High School or the TRIP program responsible for gift certificates that are lost or stolen after the certificates have been counted and signed for at the pickup table.

Your Signature: _____ Date: _____

4. Please Note: Participation in the TRIP program does not guarantee enrollment for your child. If your child never attends Valley Christian High School, you may notify us in writing to tell us where to direct your rebate from the enrollment groups listed in section # 1 above. Please initial: _____
