Tuition Reduction Incentive Program (TRIP)

Registration Form
Pella Christian Schools

This form must be signed and returned to the coordinator in order to participate in the TRIP program.

1. General Information:

Name:_____
Last First Spouse

Address:_____

City:_____State:_____Zip:_____

Telephone: (_____)_____-_____

2. Please direct my earnings from this program to:

_____ My family tuition account ~ (check only one) ____(PCGS) _____(PCHS)

_____Family of:_____(up to 4 families allowed)
confidential? _____yes _____no

_____Future tuition account. (projected school year of enrollment:_____)

_____PC Grade School : _____Fund

_____PC High School : Tuition Assistance Fund

3. Disclaimer:

Certificates may be sent through U.S. mail. To receive your certificates through the mail enclose a self-addressed stamped business size envelope, carefully read the information on your order form and initial the disclaimer provided there.

Complete this part if you want your child or another child to bring your certificates home. Certificates will only be sent home with your child if you have a current signed disclaimer on file. A new disclaimer must be filled out each school year.

I (we) authorize the TRIP committee to release my gift certificates to:

Child's name:_____Grade/Teacher_____

I do not hold Pella Christian Grade School or the TRIP committee responsible for lost or misplaced certificates.

Signature:_____ Date:_____

4. I (we) have read, understand, and will abide by the policies of the TRIP program.

Signature:_____ Date:_____

For Office use only: Family # _____