Alternate Scrip Pick-Up Waiver Form

Date: _____

Scrip Customer Name: _____

Scrip Customer Email: _____

I, _____, hereby authorize St. Stephen's to use the following alternate delivery method:

{   } Please send scrip order home with the following student:

_____
Student Name and Grade

{   } Please send Scrip order home with the following alternate person:

_____
Alternate's Name

In addition to authorizing the alternate delivery method listed above, I understand that I take full responsibility for the security of any order delivered by these methods, and I hold harmless St. Stephen's for loss, theft, or any other disappearance of scrip orders once they are delivered in good faith via on of the methods listed above.

_____   _____
Signature   Date