## ASSUMPTION SCRIP CENTER 6393 Belmont Ave, Belmont, MI. 49306

## **SCRIP USER PROFILE**

Choose one: New SCRIP u	ser Changing my info	ormation
DATE:		
LAST NAME:	FIRST NAMES (PARENT	TS):
ADDRESS:		
CITY:	ZIP:	
PHONES: HOME-	WORK or CELL-	
E-MAIL ADDRESS  50% Of all SCRIP profit goes to the Educational Endowment Fund.  Please select a fund below for the other 50% of your profit to go into.		
		Check One Only
1. I want 100% to go to	the Educational Endowment	Fund
2. Assumption School Tuition for your family		
Assumption School Tuition for another family     (Fill out the section below)		
4. Future Assumption S	School Tuition for your family	
5. Religious Education	Tuition for your family	
6. Religious Education (Fill out the section	Tuition for another family below)	
7. Catholic Secondary	School Tuition for your family	
8. Catholic Secondary (Fill out the section	School Tuition for another fam	nily
If you selected a Tuition Fund other than your own (#3, #6, or #8), please complete the section below.  This information pertains to the family you want credited.		
LAST NAME:	PARENT'S FIRST NAMES	S:
ADDRESS:		
CITY:	ZIP:	

Nov. 2013 ar