



Birchwood School Parent Committee

Scrip Program

Standing Order Form

Family Name/Grade(s): _____

E-Mail Address: _____

Phone: _____

- Yes! We will participate in the Scrip program this year.
- Yes! We will establish a standing order as detailed below.
- Enclosed is my check number _____ in the amount of _____ (made payable to Birchwood School Parents Committee) to cover the cost of my first order. (Required for first order.)

Merchant	Denomination	Quantity	Frequency (weekly, monthly, etc.)
Example: Applebee's	\$25.00	2	monthly

I understand that this standing order will become effective immediately upon receipt by the Parent Committee and will remain in effect until the end of the 2010-2011 school year unless amended or cancelled in writing. Further, I understand that payment for subsequent orders is due within 10 days of delivery of the standing Scrip order to me.

Authorized Signature

Date

Please return this form as soon as possible to Paula Hendryx, C/O Birchwood School
Thank you for your support of this great fundraising program for our school!