

GROVER GOLD

Tuition Reduction Incentive Program (T.R.I.P.)

REGISTRATION FORM

Oak Grove Lutheran School

School Year 2009-2010

1. Please SIGN and return ENTIRE form along with a yearly \$5.00 FEE:

Your name _____ Spouse: _____
(Last First) (First)

Address _____

City _____ State _____ Zip _____ Home Phone _____

Email Address _____ Cell/Work Phone _____

Please designate where you would like your earnings to go:

- | | |
|--|---|
| <input type="checkbox"/> My Family's Tuition Reduction | <input type="checkbox"/> Family of _____ |
| <input type="checkbox"/> Elementary Academic Programming | <input type="checkbox"/> MS/HS Academic Programming |
| <input type="checkbox"/> General Tuition Aid Fund | <input type="checkbox"/> Grover Gold TRIP Program |

Can we call you to help with this Grover Gold Program? (____)Yes (____)No

I will pick up my Grover Gold orders at: (____)North Campus (____)South Campus

2. DISCLAIMER. Complete this part if your child is permitted to bring your certificates home. Your child will receive only the envelope of certificates ordered under your family number. Certificates will not be sent home with your child if this DISCLAIMER is not on file. I AUTHORIZE GROVER GOLD TO RELEASE MY T.R.I.P. GIFT CARDS TO MY CHILD. I WILL NOT HOLD OAK GROVE LUTHERAN SCHOOL OR THE GROVER GOLD PROGRAM RESPONSIBLE FOR ANY LOST OR MISPLACED CERTIFICATES.

Child's name: _____ Grade: _____ Teacher: _____

Date: ____/____/____

Parent's Signature

3. **FUTURE FAMILIES ONLY**. Complete this part if your child is not yet enrolled at Oak Grove Lutheran School Pre-K through 12.

Projected date of enrollment: _____

Child's name: _____

4. **AGREEMENT**. I have read, understand and will abide by the policies of the Grover Gold TRIP Program.

_____ Date: ____/____/____
Signature

PLEASE MAKE CHECKS PAYABLE TO: "GROVER GOLD"

OFFICE USE ONLY

FAMILY# _____ FUTURE FAMILY # _____

\$5.00 PAID CASH CHECK #: _____