

## **WAIVER FOR SCRIP ORDERS CARRIED BY STUDENTS**

I hereby grant permission for	
(Names and grade of stude	ents)
To deliver payment for purchase of scrip to St. Charles Bord cards from the school and take it home.	romeo and/or pick up scrip gift
Also, I agree and understand that STCHBS Scrip will not be stolen scrip which may occur during the transportation of soffice.	•
I entrust the responsibility of the scrip transaction with the student(s) named above and to no other. If, by chance this student is relieved of the task and/or another student should be assigned, I will notify the STCHBS Scrip Coordinator in writing of these changes.	
Signature of parent	Date