St. Ann School & Religious Education
Tuition Reduction Incentive Program
Registration Form
2017-2018 School Year

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PART A – TO BE COMPLETED BY ALL T.R.I.P. PARTICIPANTS

Parent's Name _____
Last First MI

Student's Name _____ Teacher/Grade _____

Address _____ email _____

City _____ State _____ Zip Code _____

Phone: Home _____ Work/Cell _____

PLEASE CHECK ONE:

I would like my TRIP credit applied to my tuition quarterly _____

I would like my TRIP credit held for the entire year, to be credited at the start of the next school year _____

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PART B – FUTURE STUDENTS

My child, _____, is not yet enrolled in St. Ann's School and is expected

to start in the year 2018 2019 2020 2021 20222 Please hold my credit.

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PART C – NON-SCHOOL FAMILIES (Please check one)

_____ I am a friend of _____ and I direct my credit to their tuition account.
School Family

_____ Please direct my credit to the St. Ann Subsidy Fund.

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PART D – DISCLAIMER – To be completed if you intend to send your order home with a student.

I authorize St. Ann T.R.I.P. to release my T.R.I.P. certificates to my child _____. I will not hold St. Ann School or St. Ann School Board responsible for any lost or misplaced certificates.

I HAVE READ, UNDERSTAND, AND WILL ABIDE BY THE GENERAL POLICIES OF T.R.I.P.

Signature _____ Date_____