Sonnenberg Mennonite Church/Central Christian School Scrip Program

Office Use Only						
Acct #						

Enrollment Form

I. ENROLLMENT INFORMATION								
First Name Spouse			Last Name					
Stree	et Address			1				
City				State	Zip			
Primary Phone Number to contact you			ct you	E-mail				
Children at Central 1.				Grades 1.				
2.3.				2. 3.				
4.				4.				
II. F	PLEASE CREDIT N	IY ACC	DUNT TO (ch	eck one box belov	v and provide information):			
	Tuition reduction / for current CCS far		Last	First	Spouse			
Tuition reduction for partnership church			Church Nam	е				
			• ()					
III. N	iii. METHOD OF DISTRIBUTION (check one) A student courier will receive my certificates. A signed Waiver of Release for Courier is required.							
	A staff member will receive my certificates.							
	Please place certificates in my school mailbox (on campus personnel only)							
	I will pick up my certificates at the school main office							
	Mail my certificates to my home. I will include \$1 for shipping and handling with each order.							
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IV. I have read and understand the policies and guidelines, and I agree to abide by these policies.							
Signature	Date						