LAKE MICHIGAN
CATHOLIC SCHOOLS
BUSINESS OFFICE

SCRIP PROFIT SHARING
ENROLLMENT FORM

SCRIP Earnings Time Period
4/1/2017 through 3/31/2018

Family Name _____
Last First

Address _____City _____State _____ Zip_____

Daytime Phone # _____ Evening Phone # _____

Direct my 100% credit to (Check one):

( ) My Personal 2018/2019 Tuition Account

( ) 2018/2019 Tuition Account of the _____Family

( ) Parish _____

( ) Other (Please contact SCRIP office regarding eligible recipients)

( ) LMC General Operating Fund

You may re-direct your credit at any time by signing and dating another enrollment form available through the Business Office.

Signature:_____ Date:_____

Future Families Only: Complete this section if your first child is not yet enrolled in Lake Michigan Catholic Schools.

Projected Date of Enrollment:_____ Child's Name:_____

All credits generated will be held by the Lake Michigan Catholic SCRIP Profit Sharing Program for future tuition payments. Credits will be applied to tuition due upon your 1st child being registered in the school. Should the child not be enrolled in the LMC System, all credits generated will be directed to the LMC General Operating Fund.