

**Orange City Christian School  
Tuition Reduction Incentive Program (TRIP)  
Registration Form**

Please sign and return this form to the TRIP coordinator in order to participate in the TRIP program.

**1. General Information**

Name: \_\_\_\_\_  
                    Last                                    First                                    Spouse

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Home) \_\_\_\_\_ - \_\_\_\_\_ (Work)

E-mail address \_\_\_\_\_

**2. Please direct my earnings from this program to:**

- \_\_\_\_\_ My family tuition account at OCCS or Covenant Kids preschool (circle one)
- \_\_\_\_\_ Calvary Covenantal Education Ministry
- \_\_\_\_\_ Immanuel CRC Fair Share
- \_\_\_\_\_ First CRC Fair Share
- \_\_\_\_\_ Redeemer Fair Share
- \_\_\_\_\_ My UCHS tuition account
- \_\_\_\_\_ OCCS Tuition Assistance Fund
- \_\_\_\_\_ Future tuition account (projected school year enrollment \_\_\_\_\_)
- \_\_\_\_\_ Family tuition account of: \_\_\_\_\_  
(may include multiple families)

**3. Disclaimer**

Complete this part if you want your child or another child to bring your certificates home. Certificates will only be sent home with your child if you have a current signed disclaimer on file.

<p>I (we) authorize the TRIP committee to release by gift certificates to: Child's name _____ Grade/Teacher _____ I do not hold OCCS or the TRIP committee responsible for lost or misplaced certificates. Signature: _____ Date: _____</p>
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**4. I (we) have read, understand, and will abide by the policies of the TRIP program.**

Signature \_\_\_\_\_ Date \_\_\_\_\_