

**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

\_\_\_\_\_ Hospers 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.

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: \_\_\_\_\_

4. I (we) have read, understand, and will abide by the policies of the TRIP program.

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