

**The Smart Money Program
Lebanon Catholic School**

2018-19 School Year

Please complete this form and return it to the LC Smart Money Office.

Parent Name: _____

Email Address: _____

Daytime Phone Number: _____

Credit from my Smart Money orders should be applied to: (choose one)

- _____ Tuition Account of Student(s) Currently Attending LC
- _____ Future Tuition Account
- _____ Teacher Account
- _____ Tuition Angel (scholarship in financial crisis)
- _____ LC Smart Money Scholarship (awarded to a graduating senior)
- _____ Other _____

Please send my orders home for 2018-19 school year: (choose one)

- _____ Student Name: _____ Homeroom/Grade: _____
- _____ Office Pick Up
- _____ LC Mailbox

Please sign acknowledging our policy regarding lost or stolen cards.

I understand that the Smart Money Program is not responsible for lost or stolen cards once my order is delivered to a student, classroom, parent or representative.

_____/_____
Signature Date