

INSTRUCTIONS FOR ENROLLMENT

Thank you for your interest in becoming part of UnitedScrip. We are happy to play a small part in making the dreams of your organization a reality. As you complete the enrollment process, please feel free to contact us if you have any questions or need clarification. We are here to help you and look forward to working with you!

PLEASE FOLLOW THESE SIMPLE STEPS TO COMPLETE YOUR ENROLLMENT.

- 1. Fill out the necessary forms listed below
 - Enrollment Form
 - Payment/ACH Bank Account Form
- 2. Email or fax the completed forms to UnitedScrip.
 - Fax #: 864-886-9704
 - Phone # 864-886-9701
 - Email: info@unitedscrip.com
 - Please follow-up with a phone call to ensure we have received your information!
- 3. Mail the signed, original forms to UnitedScrip.

UnitedScrip, Inc. 305 Catawba Circle Seneca, SC 29672

- 4. Once your account has been established, you will receive a 'Welcome' email from info@unitedscrip.com to follow and confirm your enrollment process. This will provide additional information, tips and guidance as you establish the foundations, organize, educate, and begin your scrip program.
- 5. Please add info@unitedscrip.com to your safe senders list so that you will receive your introductory email.

UNITEDSCRIP

WELCOMES YOU AS A SCRIP PARTNER!

We are honored you have selected UnitedScrip as a fundraising partner for your organization. This Enrollment Package includes all of the forms you will need to complete and return to UnitedScrip. Contact us at any of the numbers below and speak with our New Group Coordinator for details.

	HOW TO CONTACT UNITEDSCRIP				
PHONE	864.886.9701				
TOLL FREE:	866.611.9701				
FAX:	864.886.9704				
INTERNET:	General Information <u>www.unitedscrip.com</u>				
	Group Support, Updates, Order Placement 24/7:				
	www.scripzone.com/groupleaderlogin				
	Online Family Ordering 24/7:				
	www.scripzone.com				
MAIL:	UnitedScrip, Inc.				
	305 Catawba Circle				
	Seneca, SC 29672				
Customer Service representatives are available					
9 a.m. – 3 p.m. EST Monday – Friday					
	Email Information				
GENERAL	info@unitedscrip.com				
INFORMATION					
NEW GROUPS	info@unitedscrip.com				
	<u>cmrampey@unitedscrip.com</u>				
BILLING/ACCT	steve.mitchell@unitedscrip.com				
RECEIVABLE NEWSLETTER	•				
	info@unitedscrip.com				
SOFTWARE	software@unitedscrip.com				
ORDERS	orders@unitedscrip.com or www.scripzone.com				
SCRIPZONE INFORMATION	support@scripzone.com				
INFORMATION	info@scripzone.com				

UNITEDSCRIP NONPROFIT AFFILIATE ENROLLMENT FORM

AFFILIATE/ORGANIZATION INFORMATION

Organization Name:	Phone:				
Organization Address:					
City:		State:	ZIP:		
Permanent/Default Shipping	Address (if diff	erent form abov	ve):		
City:	State:		ZIP:		
Fax: Ema	iil:		Tax I.D. #		
Circle Default Delivery Me	thod: UPS Res	idential / UPS	S School/Business / Customer Pick-Up		
COORDINATOR/CON	ITACT INFO	ORMATION	J:		
Contact Name:			Cell/Home Phone:	Cell/Home Phone:	
Email:					
Alternate Contact:			Cell/Home Phone:		
Alternate Contact Email:					
Program Treasurer Name:			Cell/Home Phone:		
Treasurer Email:			I		
METHOD OF GROUP PAYMENT (REQUIRED)					
ACH CHECKING				h	

SCRIP ENROLLMENT INFORMATION FOR WEBSITE

ScripZone Group Name:	If different from abo	ove		
Which method(s) of online user/member payment will be	☐ Individual Check	to Group		
allowed on your ScripZone site? (check all that apply)	□Credit Card			
	☐ Bank Draft			
Which shipping methods will you allow or prefer?	Options for orders ☐ Allow members	o default organization delivery address s paid with credit card only: to pay for shipping to home or alternate address ers to pay and ship directly to their home address		
ScripZone Coordinator Name:	·	. , ,		
Organization/Home Phone:				
Cell or Personal Phone:				
Coordinator's Email for Administration of ScripZone Site: Check here is you have Registered as a User on www.ScripZone.com				
required to Register as a New User of	ıt <u>www.scripzone.cor</u>	the ScripZone.com site for your organization is n. This step is essential in order to connect them unitedscrip.com when registration occurs.		
To set up your program online, we will need one Campaign and one Team Name. > A Campaign reflects your goals and how your profits will be utilized or divided. ■ Name Example: Playground Fund, General Fund, Field Trip. ■ Profit Assignment or 'Split' Example: Default 100% to Group, Team 0%, Family 0% > A Team can be your organization or a subgroup within your organization. ■ Example: Springfield Elem. School PTA or Smith K- 5 Classroom > You may add Campaigns and Teams or make changes from the Group Admin Level.				
Example 1: General Fund Support (Conganization: 100% Team/Classroom: 0% Parent or Member: 0%	ampaign Name)	Example 2: Field Trip (Campaign Name) Organization: 20% Teams/Classroom: 20% Parents: 60%		
Campaign Name:				
Family/Member:	: Highlight and Type	%. (School, Club, Troop, Non Profit) . %. (Classroom, Team, or Subgroup) . %. (Family of youth, club member, attendee)		
Team/Classroom Name: (list one)				

Please include a list of your program's officers, staff, or individuals authorized to place orders, request banking account information, passwords, or shipping address changes.

Name	Position/Title	Email	Phone

PLEASE INCLUDE PROOF OF YOUR NONPROFIT STATUS: a copy of your IRS Letter of Determination or a copy of your Articles of Incorporation. Please include Employers I.D. Number (EIN)

Where or how did you find out about UnitedScrip	?

FOR OFFICE USE ONLY

QB	UPS	Oursc	rip.com			ScripNotes	Phone
Email	QB Notes	ACH	Bank	Report	A/R	Acct/ID Number	
Administrator Na for S	ame and Email ScripZone.com						

PAYMENT POLICIES & PROCEDURES

In order to better serve your group or organization, our inventory is purchased in advance to enable fulfillment of your order immediately, shipping within 24 hours, (normally the same day as your order is placed), reducing your shipping and turn-around time to parents. Therefore, it is essential to our operations that all invoices are paid promptly, and the following policies and procedures established.

ACH PAYMENT INFORMATION (REQUIRED)

- The recommended method of payment is ACH or electronic fund transfer. ACH (Automated Clearing House) is a nationwide network of banks, businesses, and account holders. Authorization of ACH payment ensures prompt shipment of your order.
- The amount debited from your account will be the total of the invoice(s) for the purchase made.
- ACH payments will be processed within one business day, and deducted from your account within two business days.
- Payment will not be processed for any certificates that are backordered.

We strongly recommend and encourage all groups to consider this option. It saves you the hassle of processing checks and assures that orders will always ship promptly. We will gladly provide references from groups who use this system.

PAYMENT BY CHECK (Available only with authorized permission)

- An invoice will be emailed to you when the order is placed in our system. Fax a copy of the written check to 864.886.9704 and we will release your order.
- Please mail your check immediately. Payment should be received within 3 days of order placement.
- Tardy or late payments may result in suspension of this payment option.
- Your payment should include your group name and the invoice number(s) to which the check is to be applied.

GENERAL INFORMATION

- All invoices are to be paid in full. Any credit for returned or exchanged certificates will be made to your account in the form of a credit memo.
- No new orders will be processed if your account has an outstanding invoice more than ten days old.

GROUP PROFIT DISBURSEMENT

Profits generated from orders paid by Credit Card or the ScripPay (ACH) will be applied to Group Invoices or sent directly to the organization on an agreed upon schedule. More information in detail is available in the Administrator Manual or by calling our offices.

YOU MAY FAX THIS FORM FOR INITIAL APPROVAL

BUT AN ORGINAL COPY IS REQUIRED BY MAIL.

ATTACH GROUP VOIDED CHECK HERE.

The following information will authorize UnitedScrip to debit your organization's bank account for your UnitedScrip purchases. Please provide the requested information and attach a voided or cancelled check. UnitedScrip will use this information to verify the accuracy of your depository account and routing numbers. UnitedScrip will not use this information for any other reason.

Organization Name:	Shipping Address:	
Organization Phone Number:	Program Coordinator:	
Organization's Bank Name:	Bank Phone:	
City:	State	Zip
Type of Account (Check only one):	Checking	ng
Bank ABA/Routing # (#1 below)	Bank account	number # (#2 below)
I (we) hereby authorize UnitedScrip to initiate debit e depository named above to debit such account. This a written notification from me (or organization/group/teUnitedScrip a sensible opportunity to act on it.	authorization is to remain in fu	ll force and effect until UnitedScrip has received

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President	
Treasurer	
Scrip Coordinator	
Comp Coordinator	

Please sign and return with the Enrollment Forms if your organization will utilize the ScripZone Individual ACH for Registered Users.

Group Terms and Agreement for ScripPayment Gateway

What is ACH?

The Automated Clearing House (ACH) network is a highly reliable and efficient, electronic funds transfer system. NACHA-The Electronic Payments Association develops the rules and standards which provide for the interbank clearing of electronic payments for participating depository financial institutions. Both the Federal Reserve and Electronic Payments Network act as ACH operators, or central clearing facilities through which financial institutions transmit or receive ACH entries.

ScripPayment Gateway is a service provided in conjunction with the Federal Reserve Bank, and UnitedScrip for your organization, providing a means for payment of orders placed on ScripZone by your Members and Supporters. UnitedScrip receives these payments on your behalf and applies the face value of each order toward the total complied order or orders. In order to provide this service to members, your organization must also be enrolled for ACH Direct Payment.

Individual Members or Supporters must establish ScripPayment Accounts thru www.scripzone.com. Individual banking accounts will be verified through a two-step process to confirm the account validity (a 2 -4 day process), and once confirmation is complete, individuals will have the option of direct payment for each order. This option must be approved and enabled by your organization for members to have access to" the enrollment process or the "My ScripPayment Center" link on their Homepage of ScripZone.com (Groups not utilizing the ScripPayment Gateway will not be able to view the ScripPayment Center on the www.scripzone.com website.)

The following process occurs when you choose to allow payment with ScripZone's Individual ScripPayment Gateway.

- Members login to the secure (GeoTrust Certified) www.scripzone.com site.
- Members choose to pay utilizing ScripPayment Gateway.
- Member's checking accounts will be debited via the Automated Clearing House for the face value of order plus a \$0.50 convenience fee to cover processing charges.
- Member orders are held in the queue until Group Administrator compiles or releases the entire order to UnitedScrip for processing.
- Member's orders are then shipped together to the Organization.

Please be aware that should Member payments be declined, rejected or returned for any reason, UnitedScrip will:

- 1. Cancel the order if order has not been released for shipment.
- 2. If order has been shipped, Group Administrator will be notified to hold individual order for payment.
- 3. The Group/Non-Profit will be charged the amount of order in full, plus a banking fee of \$20.00 minimum. (Fees may vary by individual banks) Organizations or Groups must collect payment from individual in full plus any banking fees.
- 4. Group or Organization may request that ACH option removed as option for individual.

X	X		
Officer/President/Scrip Coordinator	Treasurer/Witness		