



FINANCIAL RESPONSIBILITY AND CONTRACT AGREEMENT

LIST NAME OF PERSON IN CALIFORNIA RESPONSIBLE FOR SCHOOL ACCOUNT:

Name: _____ Parent Guardian Host Parent
First (given name) Middle Last (family name)

Current Address:

Number & Street City State Zip

Telephone Numbers:

Home # (____) _____ Work # (____) _____ Cell # (____)

Employed by: _____ Position / Title: _____

Employer's Address:

Number & Street City State Zip

I agree to meet all financial obligations promptly or immediately contact the school if a delay is necessary. I understand that failure to meet the financial obligations of this student will result in termination of the student's attendance at Woodland Christian School.

Signature

Date