



ELEMENTARY CAMPUS  
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Phone 530.666.6615 • Fax 530.666.3470  
MIDDLE & HIGH SCHOOL CAMPUS  
1787 Matmor Road • Woodland CA 95776  
Phone 530.406.8800 • Fax 530.406.0900  
[www.woodlandchristian.org](http://www.woodlandchristian.org)

# FINANCIAL RESPONSIBILITY AND CONTRACT AGREEMENT

Student Name: \_\_\_\_\_

## 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 #: (\_\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell #: (\_\_\_\_\_) \_\_\_\_\_

Work #: (\_\_\_\_\_) \_\_\_\_\_

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