



Date: \_\_\_\_\_

RE: Text Book Loan Policy

To Whom It May Concern:

My child will be attending school at Word of Life Christian Academy in Baldwinsville for the 2012-2013 school year. Please accept this letter as a formal request for textbooks through the textbook loan policy. Attached are the classroom books my child will need for this school year. I am requesting that these textbooks be shipped directly to the school. Please feel free to contact me with any questions or concerns. Thank you!

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Parent/Guardian Signature

Date

Child's Name: \_\_\_\_\_

Parent(s)/Guardian(s) Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Grade Entering: \_\_\_\_\_

School Attending: Word of Life Christian Academy  
PO Box 86, 12 East Oneida Street  
Baldwinsville NY 13027