

Textbook Request

TO: _____
(Name of School District in which you reside)

To Whom It May Concern:

My child(ren) listed below is (are) enrolled in the Hudson Valley Christian Academy for the school year 2008-2009. By law, I am entitled to a monetary allowance for secular textbooks which remain the property of your school district. Please provide either the textbooks or the money to Hudson Valley Christian Academy at the following address:

Hudson Valley Christian Academy
PO Box 135
Mahopac Falls, NY 10542

Child's Name

Grade

_____	_____
_____	_____
_____	_____
_____	_____

Signature of Parent or Guardian

Date