

To be completed by Area Director:

StudentName: _____

LocalDirector: [KatherineAtkinson](#)

DirectorPhone: [801-292-7574](#)

DirectorEmail: kacomer@comcast.net



Adventure Homestays Abroad
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Miami Beach, FL 33139
415-509-6757
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HOST FAMILY APPLICATION

FAMILY INFORMATION

Father		Mother	
Name:		Name:	
Father's Occupation:	Employer:	Mother's Occupation:	Employer:
Working Hours:	Working Days:	Working Hours:	Working Days:
Work Phone:		Work Phone:	

Family Address:		City:	
State:	Zip:	Home Telephone Number;	E-mail:

OTHER MEMBERS OF THE HOUSEHOLD

Name:	Age:	Son/Daughter/Other:	Interests/Hobbies/Occupation:

What other activities/hobbies does your family enjoy? _____

Does anyone in the household speak another language? If so, who, and which languages? _____

Does your family have any pets? _____ If so, what kind, how many, indoors/outdoors? _____

Has your family ever hosted an international student? _____

What does your family hope to get out of hosting an international student? _____

Is your family willing to host a: boy _____ girl _____ either _____

Will the student share a bedroom? If so, with whom? (private bedroom is not necessary, but student must have own bed)

Does anyone in the household smoke? _____

Would you agree to hosting a student who smokes? _____

Does any member of the household suffer from any chronic illness? If so, please specify who, and nature of illness:

REFERENCES

Name:

Address:

Telephone Number:

1. _____

2. _____

Signature of Host Father

Date

Signature of Host Mother

Date

Katherine Atkinson
Area Director

801-292-7574
Telephone