

Thank you for your willingness to host the Matsiko World Orphan Choir children and staff. It is our intent to offer the children the best environment possible. We appreciate your cooperation in providing the following information in order to meet our goal.

PARENT: First Name	Last N	ame			
PARENT: First Name	Last Name				
HOME ADDRESS:					
Street					
City	State			Zip Code	
Home Phone	Cel	l Phone _			
E-mail					
CHILDREN AT HOME: Name		M/F		Age	
OTHER PERSONS LIVING AT YOUR HOMI					

Host Family Name:
ABOUT YOUR HOME:
Do you live in: House Apartment Other How many bedrooms? Bathrooms?
What is your preference to the number of children and adults you would like to host? All children are
accompanied with a chaperone and never by themselves. Minimum is 2-3 (No guarantees we will be able to accommodate all requests) Girls Boys Adults most needed
Do you speak Spanish? Yes No
Will the choir team have their own room? Yes No
If not, whom will they be rooming with?
ABOUT YOUR FAMILY: Church or Organization Affiliation:
Do you have pets? Yes No How Many?
What kind?
Kept where?
Does any member of the family have a serious illness, disability, nervous or mental disorder? Yes No
If yes, please explain
Has any family member living with you been convicted of a felony? Yes No
Does anyone living with you have a drug/alcohol problem? Yes No
AGREEMENT By signing below, I agree to abide by decisions and policies of ICN staff and I do hereby authorize local and/or federal enforcement officials to disclose criminal history record information for the purpose of becoming eligible to be a host family. Birth date is required for criminal record check.
Host Mother's Signature: Birth date:
Host Father's Signature: Birth date:
Other Adult Member:Birth date:
Host Family Coordinator Signature: Date: