Albany Junior High School Homestay Application Form

Section 1: Personal Information			
Family Name:	First Name:	Preferred (English) name:	
Gender: Male ☐	Female ☐	Date of Birth:	Nationality:
Address (Home country):			
City:		Country:	Postal code:
Phone	Fax	Email	
14 years old and above $300 pw ☐		**Under 14 years old $320pw** ☐	

Section 2: Family/Guardian Details	
Mother's name:	Father's name
Address:	Address:
Telephone: Work:	Telephone: Work:
Mobile phone:	Mobile phone:
Email:	Email:

Section 3: Emergency contact in NZ (if applicable e.g. Relatives/close family/Agent)	
Name	Name
Address:	Address:
Telephone: Work:	Telephone: Work:
Mobile Phone:	Mobile Phone:
Email:	Email:

Section 4: Accommodation Details	**Any Dietary issues?**
Homestay Period From: until:	Medical Problem/Allergies/Requirements:
I would like to a homestay with : Younger children ☐ Older children ☐ No children ☐ No Pet ☐ Pet ☐ N/A ☐	Airport transfer requires? Yes ☐ No ☐
	Arrival / Departure
	FL No. / FL No
Special Request :	Date/ Time / Date/Time

Section 4:Insurance

AJHS requires all students to have insurance covering accident and sickness.
New Zealand Insurance / Worldwide Insurance cover will be accepted only

Please send me a quote for insurance ☐	**I/my agent will arrange medical insurance my self** ☐

I have read, understand and accept the condition of homestay printed on international students information booklet.

Signature of applicant:	**Date:**
Signature of parent/guardian:	**Date:**

IMPORTANT: **Please note that we cannot accept your booking without your signature and that of your parent/guardian.**