

HOMESTAY DETAILS

PLEASE FILL OUT

AND RETURN

**COMPLETE ONLY IF REQUIRING US TO
FIND YOU A HOMESTAY WE REQUIRE
THIS FORM AT LEAST ONE MONTH
BEFORE ARRIVAL**

Date _____

First Name _____

Family Name _____

Home Address _____

Phone No _____

Mobile No _____

Email _____

Male [] Female []

Date of Birth _____

Passport No _____

Nationality: _____

Religion: _____

Do you require airport pickup service?

Yes [] No []

Arrival Date _____

Arrival Time _____

Flight No. _____

Date you require homestay

accommodation?

Emergency Contact Details:

Name _____

Relationship to you _____

Contact No _____

Email _____

Address _____

Personal Details:

Do you prefer a family: With children []

Without children [] Does not matter []

What are your hobbies?

Do you have any medical problems ?

Please make a detailed list

Do you have any dietary problems or

special diet?

Do you smoke? Yes [] No []

Are you willing to live with a family that

smokes? Yes [] No []

Are you OK with pets? Yes [] No []

Agents details _____

OtherComments _____

