



Canadian Aid for Chernobyl

2017 Host Family Application Form

Host Family Information *(please list all people living in the home during the child's visit)*

Name	Birth date dd/mm/yy	Gender
1.		
2.		
3.		
4.		
5.		
6.		

Please use an extra piece of paper if required

Host Parents Passport Information

	Name as on Passport	Country of Issue	Passport Number	Expiry Date
1.				
2.				

Address:	City:	
Postal Code:	Province:	Home Phone:
Cell Phone (1):	Cell Phone (2):	
Alternate Phone:	Email:	

Personal References *(No relatives please)*

Name	Address	Phone
1.		
2.		
3.		

Request for Child or Children

First Time Visits

Gender: Male Female

Age Preferred: 8 9 10 11 12 Note:

Requested Children *(must be at least 8 years of age prior to departure from Canada)*

Name	Returning (Y/N)	Birth date dd/mm/yy	Visit Length	Year of Last Visit
1.			5 weeks	
2.			5 weeks	
3.			5 weeks	

Total # of new and returning children requested: _____