

**HOMESTAY ACCOMMODATION  
APPLICATION FORM**



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<b>Personal information</b>	
<b>Family name:</b>	<b>Given name:</b>
<b>Date of Birth:</b>	<b>Gender :</b>
<b>Hobbies:</b>	
<b>Your email address:</b>	
<b>Any known allergies:</b>	
<b>School attending:</b>	
<b>Course:</b>	<b>Start date:</b>
<b>Accommodation start date:</b>	
<b>Length of stay:</b>	
<b>Parents name:</b>	
<b>Address:</b>	
<b>Phone No.: (H)</b>	<b>(M)</b>

<b>Please tick those that are applicable:</b>					
<b>Do you have religious/cultural/personal beliefs that your homestay host should know about?</b>					
<b>Do you eat:</b>	Pork	Beef	Chicken	Fish	Seafood
<b>Are you allergic to: Dairy products</b>			Y / N	<b>Peanut</b> Y / N	
<b>Any special dietary requirements:</b>					
<b>Are you allergic to dogs/ cats?</b>			<b>Can you live with pets?</b>		
<b>Do you smoke:</b>			<b>Would you live with people who smoke?</b>		
<b>Can you live with children in your homestay?</b>					
<b>Other requirements:</b>					

<b>Arrival information:</b>		
<b>Airport reception:</b> YES / NO		
<b>If NO, please provide name and contact No. of person meeting you:</b>		
<b>Arrival date :</b>	<b>Flight No:</b>	<b>Arrival time:</b>

<b>Office use:</b>		
<b>Date receive:</b>	<b>Sent:</b>	<b>APU:</b>
<b>HS confirm:</b>	<b>Agent:</b>	<b>FP/B/D</b>