Abbotsford School District International Program
2790 Tims Street, Abbotsford, BC V2T 4M7 Canada
Phone: 604.851.4585
Fax: 604.504.7629
Website: http://international.abbyschools.ca

HOMESTAY WAIVER FORM

***** Only students placed in a District Homestay or students that will reside with their parent(s) are exempt from signing this waiver.**

I, the parent/guardian of _____, wish to make my own arrangement for the homestay placement of my child.

I understand that the family I have selected for my child should meet the requirements of the Abbotsford School District policy in which it is mandatory that any International Student accepted to the program live with a "Responsible Adult" who is 25 years of age or older**.**

I understand that students who are leaving the District Homestay are responsible for leaving their room clean and tidy. Students who do not meet this expectation will be charged a fee of $200.

I understand that the Abbotsford School District will have no role in assessing or monitoring the suitability of the homestay family I/we have chosen or the accommodation that they may offer to my child.

I agree to absolve the Abbotsford School District of any liability for any injury, loss, damage, or expense that I or my child may incur or suffer as a result of my own homestay placement.

Our child will be residing with ☐ **Relative:** _____ ☐ **Other**
Relationship to student

Move In Date: _____/_____/_____
Month **Day** **Year**

_____ _____
His Last Name, His First Name Her Last Name, Her First Name

_____
Address City Postal Code

_____
Home Phone Mobile Phone

_____
Email

_____
Emergency Contact Name and Phone Number

I have read this agreement and fully agree to its terms and conditions.

_____ _____ _____
Parent Name Print **Parent Signature** **Date**