

# Lions Youth Exchange Host Family Application

The host family and the District Chair should complete this form.

- Please attach:** 1) A recent photograph of hosting family  
2) A letter of introduction describing the family's home and community life

If more than one family is involved in hosting, each family needs to complete a separate application. Forward the application to the Lions District Youth Exchange Chair. Please type or clearly print all information on this form. Once the information is complete, print the form and have all necessary people sign the document. Copy or scan the document and send the original to Eileen Delaney, 551 Brookland Blvd., Lansing, MI 48910.

## I. Host Family Data

Names of husband and wife \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State: Michigan Country: United States of America Postal Code: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Husband's Occupation: \_\_\_\_\_ Husband's business phone: \_\_\_\_\_  
Husband's cell phone : \_\_\_\_\_  
Wife's Occupation: \_\_\_\_\_ Wife's business phone: \_\_\_\_\_  
Wife's cell phone: \_\_\_\_\_  
National Origin: Husband \_\_\_\_\_ Wife \_\_\_\_\_  
Is Husband a Lion? [ ] yes [ ] no Club name: \_\_\_\_\_ District # \_\_\_\_\_  
Is Wife a Lion? [ ] yes [ ] no Club name: \_\_\_\_\_ District # \_\_\_\_\_  
Name, age, and gender of children living at home: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Language(s) spoken in family \_\_\_\_\_  
Religious affiliation/ preference \_\_\_\_\_  
Family interests, pastimes etc: \_\_\_\_\_  
Is home located in an [ ] Urban area [ ] Rural area [ ] Small City [ ] Large City Other: \_\_\_\_\_  
Population of town/ city: \_\_\_\_\_ Usual temperature during visit: \_\_\_\_\_  
Pets in the home: \_\_\_\_\_ Is there smoking in the home: [ ] yes [ ] no  
Previous hosting experience (include details): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please give two personal reference: Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Name \_\_\_\_\_ Phone # \_\_\_\_\_

Drivers License # for anyone over 16 in home: \_\_\_\_\_  
\_\_\_\_\_

## II. Host Family Preference

We would prefer: [ ] a girl [ ] a boy [ ] either [ ] smoker [ ] non-smoker Age \_\_\_\_\_  
Nationality and/or other preferences \_\_\_\_\_  
Complete if requesting a specific youth: Name \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ State/province \_\_\_\_\_ Country \_\_\_\_\_  
Sponsoring Lions Club \_\_\_\_\_ Length of time we can host \_\_\_\_\_  
Earliest date of arrival \_\_\_/\_\_\_/\_\_\_ Latest departure date \_\_\_/\_\_\_/\_\_\_  
Airport preferred for arrival/ departure (1) \_\_\_\_\_ (2) \_\_\_\_\_

**We confirm that a parent or other responsible adult will remain at home during the visitor's stay. In fairness to the youth and other host family(ies) involved, we understand we must relinquish contact with the youth while he or she is visiting with another host family.**

Signature of host family parent (s) \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_

### III. Lions Club Data

Club name: \_\_\_\_\_ District: \_\_\_\_\_  
City: \_\_\_\_\_ State: Michigan Country: United States of America  
Name of Lion coordinating hosting arrangements: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: MI Country: USA  
Home phone: \_\_\_\_\_ Business phone: \_\_\_\_\_  
Fax : \_\_\_\_\_ E-mail: \_\_\_\_\_

I have personally interviewed the above named host family and have reviewed their application. I certify that they have been fully informed of the program's requirements and procedures and are qualified to serve as a host family.

Signature of Lions Club President: \_\_\_\_\_ Date: \_\_\_\_\_

### IV. To be completed by the Hosting State/MD Y.E. Chair

Youth assigned to: (Family name) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: Michigan Country: United States of America  
Home phone: \_\_\_\_\_ Business phone \_\_\_\_\_  
Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Insurance certification: \_\_\_\_\_  
Indemnity form: \_\_\_\_\_  
Emergency medical authorization: \_\_\_\_\_  
Passport #: \_\_\_\_\_  
Travel arrangements – Arrival flight #: \_\_\_\_\_  
Departure flight #: \_\_\_\_\_  
Connections: \_\_\_\_\_

Y.E. Chair responsible for youth:  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: Michigan Country: United States of America  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Second Host Family: \_\_\_\_\_  
Date Host Family information was reported to sponsoring District/MD: \_\_\_\_\_  
Signature of Lions of Michigan State/MD Y.E. Chair: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** The following persons must receive copies of this application:

1. Multiple District Y.E. Chair – sponsoring country (if applicable)
2. District Y.E. Chair – sponsoring country
3. Sponsoring Lions Club
4. Multiple District Y.E. Chair – host country (if applicable)
5. District Y.E. Chair – host country
6. Host Lions Club