

# FAMILY PREFERENCE FORM

## SUMMER PROGRAM IN THE ALPS

*to be completed and returned as quickly as possible*



NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

Birthdate DD\_\_ MM \_\_ YY \_\_\_\_\_

Passport number \_\_\_\_\_ (if you do not yet have a passport, leave blank)

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( Check all that apply ) Do you prefer to live with

an individual

a couple

people with small children

people with teenage children

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Do you prefer to live with

sedentary people

physically active people

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Must you live with a family that

smokes

does not smoke

(doesn't matter)

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Do you wish to share normal family life or do you prefer to be somewhat more independent?

family life  independent

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Do you mind living one or two miles outside of central Faverges, requiring a 10- or 15-minute bicycle ride to class? (Some students have really liked this!)

I don't mind  I'd prefer it  I'd rather not!

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Do you have any allergies (pets, foods, drugs, etc.)? Please explain:

Do you have any health/dietary/religious restrictions? Please explain:

Do you have any hobbies? (musical instrument, hiking, specific sports, photography, cooking, etc.) Please name some of your pastimes:

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This information will be used to place you with the best family possible, given your preferences...and theirs!