

## HOMESTAY APPLICATION

Please complete ALL sections of this application in English. If you are under 21 years of age, your parent or guardian must also sign the application.  
Minimum age – 18 years of age.

---

### 1. NAME:

Mr./Ms.

First Name

Family Name(s)

### 2. CONTACT INFORMATION: (Permanent address in home country)

---

Street Address

---

City

Postal Code

Country

---

Mobile Telephone Number

E-mail Address

### 3. CONTACT INFORMATION IN BOSTON: (if applicable)

---

Street Address

---

City

Mobile Telephone Number

E-mail Address

4. **GENDER:** \_\_\_ Male \_\_\_ Female **BIRTHDATE:** \_\_\_ (day) \_\_\_ (month) \_\_\_ (year)

**NATIONALITY:** \_\_\_\_\_ **NATIVE LANGUAGE:** \_\_\_\_\_

---

### 5. ARRIVAL INFORMATION to BOSTON:

Date of Arrival: \_\_\_\_\_ Time of Arrival: \_\_\_\_\_

Arrival Details (Airline, flight number, train, bus, etc.): \_\_\_\_\_

---

**IMPORTANT:** Please contact your homestay host **prior** to your arrival in Boston. It is important to inform the host of the arrival time for someone to be home to welcome you. Arrival hours are 8:00am – 10:00pm. If arrival is during work hours, you might have to wait until host returns home from work. If you arrive after 10:00pm, hotel arrangements are your responsibility and move-in will be the following day per host schedule.

I would like to receive information about **airport** pickup service: \_\_\_ Yes \_\_\_ No

---

**6. HOMESTAY DATES:**

Arrival Date to Homestay: \_\_\_\_\_

Departure Date from Homestay: \_\_\_\_\_

---

**7. PERSONAL INFORMATION:**

What is your English level? \_\_\_\_\_ beginner \_\_\_\_\_ intermediate \_\_\_\_\_ advanced

Please list any allergies, health problems or foods you cannot eat:

\_\_\_\_\_  
\_\_\_\_\_

Do you smoke?

Cigarettes    \_\_\_\_\_ Yes        \_\_\_\_\_ No        \_\_\_\_\_ Occasionally

E-Cigarettes    \_\_\_\_\_ Yes        \_\_\_\_\_ No        \_\_\_\_\_ Occasionally

Vape            \_\_\_\_\_ Yes        \_\_\_\_\_ No        \_\_\_\_\_ Occasionally

Marijuana        \_\_\_\_\_ Yes        \_\_\_\_\_ No        \_\_\_\_\_ Occasionally

If you are a smoker, do you agree to smoke outside only? \_\_\_\_\_ Yes    \_\_\_\_\_ No

Do you drink alcohol? \_\_\_\_\_ Yes        \_\_\_\_\_ No        \_\_\_\_\_ Occasionally

Are you fully vaccinated? \_\_\_\_\_ Yes        \_\_\_\_\_ No (if yes, proof of vaccination required)

What are your hobbies, special interests, favorite sports and/or activities?

\_\_\_\_\_  
\_\_\_\_\_

Have you ever lived in a homestay? If so, where and for how long?

\_\_\_\_\_

Why do you want to live in a homestay?

\_\_\_\_\_  
\_\_\_\_\_

What will you be doing in Boston?  learning English  vacation  doing research  
 working  cultural exchange  other (please explain) \_\_\_\_\_

What is the name and address of your daily destination (school name and address,  
company name and address, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

### 8. PREFERENCES

A home with children?  Yes  No  Doesn't matter  
A home with an indoor cat?  Yes  No  Allergic  
A home with an indoor dog?  Yes  No  Allergic

---

### 9. INSURANCE

**IMPORTANT:** All homestay participants are **required** to have valid medical insurance for the duration of their stay in homestay in the event of an emergency. All applicants are responsible for arranging for their own medical insurance prior to moving into homestay and paying for any medical expenses if applicable during the stay.

Do you have medical insurance?  Yes  No

Name of your insurance company \_\_\_\_\_

---

### 10. EMERGENCY CONTACT INFORMATION:

\_\_\_\_\_  
Name Address (Street, City, Country)

\_\_\_\_\_  
Mobile Telephone E-mail

\_\_\_\_\_  
Relationship to Applicant Best Method of Contact

---

**11. HOMESTAY OPTIONS:**

**Standard Homestay** **\$ 340 per week**

Private room, shared bath, dinner (prepared by and with host) and continental self-served breakfast 7 days per week, commute time within 40-60 minutes to downtown Boston destinations

**Standard Bed & Breakfast Homestay** **\$295 per week**

Private room, shared bath, self-served continental breakfast 7 days per week (no access to cooking facilities), commute time within 40-60 minutes to downtown Boston destinations

**Executive Homestay** **\$430 per week**

Private room, private bath (if available), dinner (prepared by and with host) and continental self-served breakfast 7 days per week, commute time within 30-45 minutes to downtown Boston destinations

**Executive Bed & Breakfast Homestay** **\$385 per week**

Private room, private bath (if available), self-served continental breakfast 7 days per week (no access to cooking facilities), commute time within 30-45 minutes to downtown Boston destinations

*\* If your first choice is not available, we will determine the best option for you based on preferences, daily destination, and host availability. All homestay options are within 10 minutes walking distance of public transportation (local bus/subway).*

---

**12. POLICIES AND REFUNDS:**

A placement fee is due upon submission of homestay application. Notice of cancellation and/or postponement received 30 days or more prior to scheduled move-in date will result in a full refund of the placement fee. Any cancellation or postponement within 30 days results in a forfeiture of the fee.

Preferences are considered when placing clients in homes but, given factors such as availability, extensive number of household pets in American homes and limited number of homes that permit smoking, these requests cannot always be guaranteed.

In accordance with US federal law, we do not discriminate against race, color or creed. Therefore, we cannot accommodate requests for hosts of a specific racial or ethnic background, of a specific religion, with a specific number of children or any other characteristic.

By signing this homestay application, you waive and release any and all claims of liability against Global Immersions, Inc., and the employees of Global Immersions, Inc. for injury, loss, damage, accident, any sickness or illness including but not limited to any and all related to COVID or expense resulting from participation in this program. By signing this, you have read and agree to the all of the Homestay policies.

---

**13. SIGNATURE OF APPLICANT:**

Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (if applicable) \_\_\_\_\_ Date \_\_\_\_\_