

International Hospitality Center

224 Queen Emma Square * Honolulu, HI 96813 * (808) 521-3554

OFFICE USE ONLY:

Program: _____

Location: _____

PARTICIPANT APPLICATION

Name: _____ Sex: _____ Age: _____

Home country: _____ Date of Birth: _____

U.S. Address: _____

Home Address: _____

E-mail Address (if child, parent's address): _____

U.S. Telephone: _____ Home Country Telephone: _____

Father's Name: _____ Mother's Name: _____

Father's Profession: _____ Mother's Profession: _____

Brother(s) Names/Ages: _____ Sister(s) Names/Ages: _____

Your Profession/Area of Study: _____

Previous travel: _____

English level (please circle one): Fluent Good Fair Poor

How many years have you studied English? _____

School Name and Address: _____

Interests, Hobbies, Religion: _____

Have you been hospitalized or under medical treatment for any mental/physical illness in the past three years? (Please give details): _____

Do you smoke? _____ Yes _____ No (Smoking is allowed only outside host homes.)

Do you like pets (dog/cat)? _____ Yes _____ No

Can you adjust to a home with an indoor pet? _____ Yes _____ No

(over, please)

YOUR LEISURE TIME ACTIVITIES

Please check off the activities in which you enjoy participating or currently compete.

SPORTS:

- | | | | |
|---------------------------------------|---|--|--|
| <input type="checkbox"/> Aerobics | <input type="checkbox"/> Fishing | <input type="checkbox"/> Ice Skating | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Athletics | <input type="checkbox"/> Football | <input type="checkbox"/> Martial Arts | <input type="checkbox"/> Table Tennis |
| <input type="checkbox"/> Badminton | <input type="checkbox"/> (American) | <input type="checkbox"/> Racquetball | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Golf | <input type="checkbox"/> Rollerblading | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Rowing | <input type="checkbox"/> Water Skiing |
| <input type="checkbox"/> Bicycling | <input type="checkbox"/> Handball | <input type="checkbox"/> Sailing | <input type="checkbox"/> Weightlifting |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Hunting | <input type="checkbox"/> Skiing | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Horseback riding | <input type="checkbox"/> Soccer | _____ |
| <input type="checkbox"/> Field Hockey | <input type="checkbox"/> Windsurfing | <input type="checkbox"/> Surfing | _____ |

LEISURE ACTIVITIES:

- | | | | |
|--|---|---|---------------------------------------|
| <input type="checkbox"/> Classical Music | <input type="checkbox"/> Popular Music | <input type="checkbox"/> Drama/Theatre | <input type="checkbox"/> Politics |
| <input type="checkbox"/> Playing in an Orchestra | <input type="checkbox"/> Singing | <input type="checkbox"/> Photography | <input type="checkbox"/> Museums |
| <input type="checkbox"/> Pottery | <input type="checkbox"/> Jazz Dancing | <input type="checkbox"/> Ballroom Dance | <input type="checkbox"/> History |
| <input type="checkbox"/> Ballet | <input type="checkbox"/> Calligraphy | <input type="checkbox"/> Drawing/Painting | <input type="checkbox"/> Instruments: |
| <input type="checkbox"/> Reading | <input type="checkbox"/> Scouting | <input type="checkbox"/> Art | _____ |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Nature | <input type="checkbox"/> Gardening | _____ |
| <input type="checkbox"/> Student Newspaper | <input type="checkbox"/> Movies | <input type="checkbox"/> Computers | _____ |
| <input type="checkbox"/> Student Government | <input type="checkbox"/> Television | <input type="checkbox"/> Sewing | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Chess | <input type="checkbox"/> Crafts | <input type="checkbox"/> Cooking | _____ |
| <input type="checkbox"/> Indoor Games | <input type="checkbox"/> Model Building | <input type="checkbox"/> Baking | _____ |

Please list your favorite activities:

HOW DID YOU HEAR ABOUT OUR PROGRAM :

DEAR FAMILY LETTER:

On a blank sheet of paper titled, "Dear Family", write a letter introducing yourself to your future host family. Please also include a photo or snapshot of yourself.

HOMESTAY DATES: _____

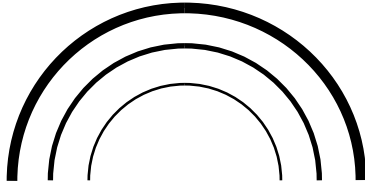
All applicants for homestay and Hospitality programs under the auspices of the International Hospitality Center are responsible for providing their own personal spending money and incidental expenses. Participants must have valid health, accident, and liability insurance, valid passport, and visa. The International Hospitality Center will not be responsible for any debts or medical expenses incurred during your homestay program. You, hereby, agree to accept full responsibility for any and all medical and personal expenses incurred, and give permission for such emergency treatment as might be necessary.

Date

Participant Signature

Date

Parent Signature (if participant is under 21)



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AGREEMENT AND RELEASE FORM

1. I, the undersigned, a participant in the:

(name of program)

(hereinafter referred to as "Program"), for good and sufficient consideration, receipt of which is acknowledged, DO HEREBY WAIVE AND RELEASE all claims against the International Hospitality Center and its Directors, Staff, Host Families and Volunteers, arising from or in any way connected with the following:

- A. Injury, loss, damage, accident, delay, irregularity or expense arising from or connected with:
- (1) the use by the Program of any vehicle or other mode of transportation or services;
 - (2) any strikes, war terrorism, weather, sickness, quarantine, government restrictions or regulations, act of God or any other reason;
 - (3) any act or omission of any steamship, airline, railroad, bus company, taxi service, sightseeing, hotel, restaurant, institute, school or university, or any other firm, company, individual or agency;
- B. Any intentional or unintentional injury, whether or not resulting in death to me or to any other person or persons, caused, in whole or in part, by me, whether alone or together with or in association with others;
- C. Any intentional or unintentional damage or injury to property, whether personal, real or mixed, owned or in the custody or possessions of me, or any other person, caused in whole or in part, by me, whether alone or together with or in association with others;
- D. Any financial or other obligations or liabilities that I may personally incur during the duration of the program, including, without limiting the generality of the foregoing, any obligations or liabilities incurred by me in any country in which the Program is conducted; and,
- E. Any injury or loss whatsoever suffered by me during the periods of independent travel (which I understand may be unsupervised) or during any absence from the Program's supervised activities.

2. I AGREE TO INDEMNIFY AND HOLD HARMLESS the International Hospitality Center, its Director, Staff, Host Families and Volunteers, and any of their agents, from any and all claims, costs, expenses, including but not limited to attorney's fees, arising out of or in any way connected with any of the matters described in section 1 above.

3. HEALTH AND SAFETY. I hereby grant to the International Hospitality Center and any of its Directors, Staff, Host Families and Volunteers, full authority to take whatever action they may consider to be warranted under the circumstances regarding my health and safety, and I fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize the International Hospitality Center, its Directors, Staff, Host Families and Volunteers, at their discretion, to place me, at my own (or my parents') expense, in a hospital within or outside the United States for medical services and treatment, or if no hospital is readily available, to place me in the hands of a local medical doctor for treatment. If deemed necessary or desirable by the International Hospitality Center, its Directors, Staff, Host Families or Volunteers, I authorize them to transport me back to my home by commercial airline or otherwise at my own (or my parents') expense for medical treatment. In the event the International Hospitality Center, its Directors, Staff, Host Families and Volunteers advance or loan of monies to me or incur special expenses on my behalf while I am abroad, I (and my parents) agree to make immediate repayment upon my return to my home country.

4. STANDARDS OF CONDUCT. I will comply with the Program's rules, standards and instructions for student/applicant/participants behavior. I hereby waive and release all claims against the International Hospitality Center, its Directors, Staff, Host Families and Volunteers, arising at a time when I am not under the direct supervision, to comply with such rules, standards and instructions; and I agree to indemnify the International Hospitality Center, its Directors, Staff, Host Families and Volunteers, against any consequences thereof. I agree that the Program shall have the right to enforce appropriate standards of conduct, and that it may at any time terminate my participation in the Program for failure to maintain these standards or for any actions or conduct which the Program considers to be incompatible with the interest, harmony, comfort and welfare of the Program and the other participants or Hosts or Volunteers. If my participation is terminated, I consent to being sent back to my home country at my own (or my parents') expense with no refund of fees.

5. ALTERATION OF THE PROGRAM. I understand and agree that the Program reserves the right to make cancellations, substitutions or changes in cases of emergency or change of conditions or in the interest of each participant, Host Family or Volunteer, I understand and agree that if performance of the condition and agreements stated in the Program description must be altered because of war or any other like reason, the International Hospitality Center, its Directors, Staff, Host Families and Volunteers have the right to make such alteration or cancellation of part or all of the Program as the International Hospitality Center, in its sole discretion, deems necessary, and that only those funds not actually used or covering administrative expenses of the Program will be refunded to me. The amount of any refund in each individual case shall be determined by the International Hospitality Center at its sole discretion.

6. TRAVEL DOCUMENTS. I understand that it is my personal responsibility to obtain all passports, visas and travel documents as may be required in order to enter all countries on the Program, and to participate in the Program. Further, I shall hold the International Hospitality Center, its Directors, Staff, Host Families and Volunteers harmless in the case where I may not obtain the necessary documents for participation in the Program. I understand that the inability to obtain these visas and other documents does not constitute grounds for withdrawal with refund.

7. REFUNDS. I understand and agree that the provisions of the Agreement and Release, rather than the provision of any other International Hospitality Center publication, concerning refunds and cancellations penalties shall control refunds.

8. MISCELLANEOUS. All references in this Agreement and Release to the "International Hospitality Center," "its Directors," "Staff," "Host Families" and "Volunteers," etc. shall include all of their present, former and future officers, directors, staff members, employees, host families, volunteers and agents. All reference herein to the "parents" of the applicant shall include the legal guardian or other adult responsible for the applicant (participant).

9. AGREEMENT. I have read and agree to all the terms and conditions set forth in this Agreement and Release and the Program brochure and understand that they constitute a part of my agreement with the International Hospitality Center.

Dated this _____ day of _____, 20 _____ .

Name of Student/Applicant/Participant

Signature

Witness

RELEASE OF PARENTS/GUARDIAN (Required of all students under 18 years of age)

I certify that I am the parent or legal guardian of the above student, and that I have read the foregoing Agreement and Release (including such parts as may subjects me to personal financial responsibility), and hereby relinquish any claim that I might have against the International Hospitality Center, its Directors, Staff, Host Families and Volunteers, their agents (as set forth above), both on my own behalf and in my capacity as legal representative of the student/applicant/participant, including without limitation any claim arising as a result of the student's leaving the supervision of the Program or at a time when the student has left the supervision of the Program.

Dated this _____ day of _____, 20 _____ .

Signature of Parent/Guardian

Signature of Parent/Guardian