## Youth Exchange – Host Family We accept a boy ( ) or a girl ( ) in our family

Family name	:				 
First name	:				 
Country / Nationa	ality:				 
We are speak the	e following language	es in our family : _			 
Address	:				 
Phone number a	and fax:				
E – mail	:				
Names and ages	s of our children:				 
Religion	:				
Father's professi	ion :				 
Mother's profess	ion:				
Smoker		:	<b>O</b> yes	<b>O</b> no	
We prefer an exc	change	:	<b>O</b> yes	<b>O</b> no	
We prefer a jour	ney as a paying gue	st:	O yes	<b>O</b> no	
Our children und	lerstand the following	g languages:			
Our children spe	ak the following lang	juages:			 
Our children hav	e the following intere	ests:			

Character and short description of our children :
Remarks :
Please enclose photography of your children.
Discharge of liability: The association declines any responsibility about the choice of the host family.
The parents are giving the total discharge to the association with their signature.
Signature :
Date :
Protection of personal data – Opt-In: The parents and additionally (where aged 16 years or more) the young person authorise by their signature the « Jugendaustausch » to use their personal data for the purposes of the «Jugendaustausch».  Personal data will not be transmitted or made available to third parties or for other purposes. They will be held in strict confidence and will be destroyed on express demand.
Parents Signature:
City and date :
Teenager Signature:
City and date :
Teenager
Signature :
City and date :
Teenagers Signature:
City and date :