

IGQ Golf College

Ph: +64 3 359 0303 Fax: +64 3 359 0304 Mailing address: PO Box 8868 Christchurch 8041, New Zealand

Homestay Application Form

Personal Information								
Name			In Chinese Pinyin					
Name in English			Date of Birth					
Current Address					Sex			
Phone		WeChat		Email				
Passport Number			Hobbies and interests					
Do you smoke?			Yes	No				
Are you allergic to anything? Like food or pets?			Yes	No				
If you answered yes, please provide details:								
Do you have any food taboos?			Yes	No				
If you answered yes, please provide details: :								
Do you have any medications that you need to take every day?			Yes	Ne				
If you answered yes, please provide details:								
Do you want a host family with young children?			Yes	No	No requiemwnts			
Do you mind having students from other countries in the same host family?			Yes	No	No requiemwnts			
Do you have any religious or customary requirements?			Yes	No				
If you answered yes								
Do you have any other requirements? If so, please provide detailed information.								
Emergency contact person								
Please provide someone we can contact in an emergency, this could be a relative or an agency.								
Name			(Please fill in pinyin at the same time)					
Relationship to you		dicate if you are						



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Phone		WeChat		Email					
Arrival Information									
In order for us to pick you up at Christchurch Airport, please inform us of your itinerary information									
Date of Arrival			Time of Arrival						
Airline			Flight Number:						
Declaration									
I have understood the fees and accommodation requirements, and understand that the accommodation fee for the first 8 weeks is non-refundable									
Signature			Date						