



Canada Phoenix Education Group

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From: Jeanne Zhang Director

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(Host Father's First Name) (Host Father's Last Name) (Occupation) (Work Number)

(Host Mother's First Name) (Host Mother's Last Name) (Occupation) (Work Number)

Address: _____

E-Mail Address: _____ Home Telephone: _____

His Cell Phone: _____ Home Fax: _____

Her Cell Phone: _____

No. of Family Members: _____ Transportation To School: _____

Information about Family Members:

Comments: _____

Home Info: _____

Family Info:

Room Info: _____

Amenities & Hobbies: _____

Vegetarian: _____

Other Languages Spoken: _____

Allow Smoking?: _____

Pets: _____