



2025 - 2026

BARRIE JR SHARKS HOST FAMILY APPLICATION



Responsible Adult #1' First and Last Name:	Responsible Adult #2 First and Last Name:
Responsible Adult #1' Birthdate:	Responsible Adult #2 Birthdate:
Home Address(es) Including Postal Code:	
Telephone Numbers:	Telephone Numbers:
Email:	Email:
Responsible Adult #1 Employer (please include address):	Responsible Adult #2 Employer (please include address):
Address (including Postal Code):	Address (including Postal Code):
Number of Children in the home:	Names and ages of Children in the home:
Please list the school(s) that are closest to your home:	
Approximately how far are you from East Bayfield Community Centre?(km)	
Do you have pets? (Please list types, how many, & inside/outside) <input type="checkbox"/> Dog(s) Breed(s): _____ <input type="checkbox"/> Cat(s) Breed(s): _____ <input type="checkbox"/> Other Specify: _____	Is anybody in the home a smoker? If yes, please indicate if they smoke inside or outside of the home. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Inside <input type="checkbox"/> Outside
Have you ever hosted an exchange student or player(s) before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How many players are you interested in billeting? <input type="checkbox"/> 1 <input type="checkbox"/> 2	
Are you able to accommodate additional players on a short term basis? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please describe the accommodations that will be available to the player(s)? Will they have their own bathroom? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Why are you interested in becoming a Host Family?	

Please email your completed application, Criminal Record Check and Vulnerable Sector Screening to:
JrSharksManager@bwha.ca



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Would you be able to give the player(s) enough personal space and refrain from asking questions about the team? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you active on social media such as Facebook, Twitter, Instagram, Message Boards etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, are you willing to sign a team social media code of conduct policy? <input type="checkbox"/> Yes <input type="checkbox"/> No Please list all social media usernames/handles:
What are your household work schedules? Does it involve travel?
Please list any household rules you would want adhered to by the player?
What is your opinion on players drinking, smoking, vaping or disregarding team policy in your home?
Will you notify the billet coordinator if there are any concerns with your player or if the player is involved with drinking, drugs, or violating curfew? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would the player be responsible for any household chores? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, please list:
Do you plan on taking any holidays during the hockey season? <input type="checkbox"/> Yes Dates Away: _____ Would you like the player relocated while you're away? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> Maybe
Please describe how your family generally spends their weekends and free time:

Thank you for taking the time to complete this application. Should we require more information or would like to set up a home visit we will be in touch.

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