

Sudbury Wolves Billet Application Form



Name _____ Age _____

Spouces Name _____ Age _____

Address _____ Postal Code _____

City/Prov _____ Email _____

Home Phone _____ Cell Phone _____

Work Phone _____

Do you have any children at home? Y N

Please indicate the name, age and gender of each child.

Name _____ Age _____ Gender M F

Name _____ Age _____ Gender M F

Name _____ Age _____ Gender M F

Name _____ Age _____ Gender M F

Do you and/or your spouse work outside the home? Y N Both

Occupation _____ Employer _____

Occupation _____ Employer _____

Do you have any pets at home? Y N

Please indicate the type and breed of each pet. _____ _____

Do you have wireless internet access in your home? Y N

Have you ever billeted a player or exchange student before? Y N

How many players are you interested in billeting? _____

Is your home smoke free? Y N

During the season and training camp temporary billets are often needed. Would you be willing to help out if the need arises? Y N

