



◆ P.O. Box 1326 ◆ 5933 Valley Pike ◆ Stephens City ◆ Virginia ◆ 22655-9998 ◆ Admissions Office ◆ 540.877.7336 ◆
◆ www.LegacyChristian-Academy.com ◆

International Program – Host Family Application

Family's Name:			
Address:			
Home Phone:			
Email:			
Father/Guardian			
First Name:		Last Name:	
Social Security #:		Date of Birth:	
Employer:		Occupation:	
Email:			
Work Phone:		Cell Phone:	
Mother/Guardian			
First Name:		Last Name:	
Social Security #:		Date of Birth:	
Employer:		Occupation:	
Email:			
Work Phone:		Cell Phone:	
Children			
Name:		Age:	Name:
Name:		Age:	Name:
Name:		Age:	Name:
Pets: <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list all pets:			
Exchange Student(s) are required to have their own bed. <input type="checkbox"/> YES <input type="checkbox"/> NO			
Summer Exchange Students may share a bedroom and/or bathroom. <input type="checkbox"/> YES <input type="checkbox"/> NO			
Full-Time Exchange Students must have their own bedroom & computer access. <input type="checkbox"/> YES <input type="checkbox"/> NO			
Host Guardian's Signature:			Date:
Host Guardian's Signature:			Date:
LCA Admissions Use Only: Host Family Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO			Date:
If NO, please explain:			