

Host Family Release Form



I, _____, the parent/legal guardian of _____,
Print Parent/Guardian's name Print Student's Name

a student at Washtenaw Christian Academy, Saline Michigan, do hereby give permission to the host

parents _____ to act on my behalf in matters of school
(Print Host Parent's names)

decisions and medical emergencies and/or decisions while a student at Washtenaw Christian Academy.

I understand that the student must call the Host Family for permission to leave school if sick (and not any other person) as long as the student is living with the host family.

I understand that it is my responsibility to convey to and communicate with the Host Family concerning ant and all expectations and restrictions regarding my student while living in their home, and that WCA accepts no responsibility for any such decisions made or not made between the Host family and me.

I understand that the International Student Coordinator and WCA do not represent or endorse any home stay company or Host family.

I understand that **the Parent or Designated Guardian MUST notify** the International Student Coordinator or an official representative of WCA **of any and all changes in living arrangements before they occur.**

I understand that the student must live in the same house with an adult over 25 years old.

I understand that the student cannot drive a motorized vehicle while living with a host family.

As the parents, legal guardians, or Organization, we hereby agree that we shall defend, indemnify, and hold harmless Washtenaw Christian Academy (WCA) and its representatives from any and all claims, causes of action, demands, costs, damages including both direct and consequential damages, specifically including attorney fees and costs, expert fees, and cost and mediation and/or arbitration fee and costs incurred, arising in any way out of the actions of my student, the Host Family, or the International Program. We further agree, at our own expense, to defend any suit or actions brought against WCA founded upon the claim of such damage to persons or property. This indemnity agreement applies to both active and passive negligence on the part of WCA and its representatives to the fullest extent permissible under law. Choice of counsel remains solely that of WCA.

(Signature of Parent or Legal Guardian)

(Date)

Email of Parent

Phone or Other Contact for Parent

Name of Host Family

Contact information for Host Family