

BOARDER'S VISITATION FORM

Boarder's Name _____

Date _____

Address _____

Home Phone. _____

Student's Cellphone _____

Our son has our permission to VISIT, this includes staying OVERNIGHT with the following people:

| <u>NAME</u> | <u>ADDRESS</u> | <u>PHONE NO</u> | <u>RELATIONSHIP</u> |
|-------------|----------------|-----------------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

How frequently do you expect your son to request leave from the hostel? _____

All other requests will require our explicit permission:

Signed: Father _____

Mother _____

Cellphone _____

Cellphone _____

PLEASE RETURN THIS FORM WITH YOUR APPLICATION FORM