Janesville Jets Billet Family Program Billet Family Application

(The following information will help us in matching compatibility of a potential host family.)

Name:	Phone Number:
Address:	Zip Code:
Email Address:	
Billet Father Cell Phone:	Occupation:
Billet Mother Cell Phone: _	Occupation:
Approximately how many m	s from the ice rink is your home?
Do you have children living	the home? No Yes
If yes, please list their age(s)	
Do you have any pets? No_	_ Yes
If yes, please list type/breed	
Is there anyone in the home	to smokes or uses tobacco products?
Are you willing or able to bi	t more than 1 player?
What accommodations will	provided to the player(s)? (Example: separate bathroom, spare
Should the player(s) provide	eir own transportation, or will you help get them to and from the
Will they have kitchen privi	es?
Will the players(s) have acco	to a washer and dryer?
In most cases, you will prov	bed linens and bath towels. Will you wash these or expect
them to do so?	

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Can they have friends over?		
Will you allow or is there room for family to stay ov	ernight?	
If yes to either of the previous two questions, what a	re the guidelines for these circumstances?	
When the team comes home from a road trip, it is type	pically very late. Will this bother you?	
Do you have any house rules or is there anything else	e that you would like to add?	
Billet Mother Signature & Date	Billet Father Signature & Date	

If you have any questions about the Jets Billet Family program please contact the Jets office at 608-752-5387 or via email at jetsbillets@gmail.com.

Return your questionnaire to:
Janesville Jets
101 E Milwaukee St
Suite 128
Janesville, WI 53545