

	Rotary District:		Club:	
TO STATE OF THE PARTY OF THE PA	WESSEX Single Placemen	nt Consent For	rm for:(Inbound Stu	dent's Full Name)
My signatu	are below confirms that I,			
			(Print Student's Name)	
agree to liv	e with			
		(Print Host Fa	mily First and Last Nan	ne)
_	host parent placement with			=
parent plac	ement is with a: (Please ch	neck box)	■ Male Host Parent	Female Host Parent
Signed:				
	(Signature of the Student))		
Date:				
My natural	parent(s) also agree to this	and have sig	gned below to confirm	this agreement.
G' 1				
Signed:	(Natural Parent Printed N	Jame)	(Natural Parent Printed	Name)
	(Natural Parent Signature	·)	(Natural Parent Signatu	re)
Date:		Γ	Date:	

DOCUMENT RETENTION & TRACKING INSTRUCTIONS: Appropriate District or Club Officer must upload a digital copy in the YEAH online database. Records will be maintained for a minimum of three years after Exchange completion.