



Watertown Rapids Host Family Questionnaire

Please complete the form below and return it to:
Watertown Rapids, P.O. Box 6250, Watertown, N.Y. 13601

Name _____ Email _____

Address _____ City/State/Zip _____

Home Phone _____ Cell Phone _____

Do you have children living at home? Yes _____ No _____

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Does anyone in your home use tobacco products? Yes _____ No _____ If yes, type? _____

Do you have pets? Yes _____ No _____ If yes, please list below.

Breed/Type _____ Breed/Type _____ Breed/Type _____

How far is your home from the Alex T. Duffy Fairgrounds? Miles _____ Minutes _____

How many players are you willing to host? _____

Are there any special circumstances that the Watertown Rapids should be aware of? _____

Your signature below confirms that all of the information you have provided is accurate.

Signature

Date