

INITIAL APPLICATION

Please print out this application and return it to our office with a deposit of \$300 for immersion and study programs or a deposit of \$500 for semester programs. We will send you a complete application packet upon receipt.



ANDEO
INTERNATIONAL HOMESTAYS

Send this application to:
ANDEO – International Homestays
620 SW 5th Ave, Ste 625
Portland, OR 97204

Contact us if you have any questions:
Phone: 503-274-1776 or 1-800-274-6007
Email: info@andeo.org
Fax: 503-274-9004

Homestay Immersion		Homestay Study		Semester/Year
<i>GROUP TRAVEL</i>	<i>INDEPENDENT TRAVEL</i>	<input type="checkbox"/> Heredia, Costa Rica*	<input type="checkbox"/> Paris, France	<input type="checkbox"/> New Zealand
<input type="checkbox"/> Spain	<input type="checkbox"/> Germany*	<input type="checkbox"/> Quito, Ecuador*	<input type="checkbox"/> Loire Valley, France	<input type="checkbox"/> France
<input type="checkbox"/> + Madrid Tour	<input type="checkbox"/> France	<input type="checkbox"/> Tarragona, Spain*	<input type="checkbox"/> + Paris Tour (Loire Valley)	<input type="checkbox"/> Japan
<input type="checkbox"/> France	Independent*	<input type="checkbox"/> San Sebastian, Spain*	<input type="checkbox"/> Freiburg, Germany*	<input type="checkbox"/> Mexico
<input type="checkbox"/> + Paris Tour	<input type="checkbox"/> Spain	<input type="checkbox"/> Cadiz, Spain*	<input type="checkbox"/> Fukuoka, Japan*	<input type="checkbox"/> Costa Rica
(<input type="checkbox"/> Portland <input type="checkbox"/> Seattle)	Independent*	<input type="checkbox"/> AP Course, Spain		
<input type="checkbox"/> Mexico		(<input type="checkbox"/> Cadiz <input type="checkbox"/> Seville)		

PERSONAL INFORMATION

- Male
 Female

First & Last Name (as appears on your passport or birth certificate) _____ Date of Birth (Month/Day/Year) _____ Home Phone _____

Street Address _____ City _____ State _____ Zip _____

Student Email Address _____ Parent/Guardian Names (first and last) _____

School You Attend _____ Parent/Guardian Email _____

Language You Study _____ Current Language Level _____ Your Language Teacher's Name _____

How did you learn about this program?

If you are from Oregon or Washington, would you like to try hosting a student in your home? Yes No

*INDEPENDENT TRAVEL DATES (for programs without set dates)

Immersion Program: France Independent, Spain Independent, Germany
Study Programs: Heredia, Quito, Tarragona, San Sebastian, Cadiz, Freiburg, Fukuoka

Arrival Date: _____ Departure Date: _____

Number of weeks: _____

Would you like to share your travel information with other students traveling from your area? Yes No

PAYMENT DETAILS

- Enclosed is a check for the deposit
 Please charge the deposit amount of \$_____ to my: VISA MasterCard

Card Number _____ / _____ Expiration _____ / _____ VIN Number _____
Month/Year 3 digit code on back of card

Billing Address (if different from above address) _____

Signature _____ Date _____ / _____ / _____
Month Day Year

If Andeo cancels a program or if you are not accepted for a program, you will receive a full refund of your deposit. If you cancel your application prior to acceptance to the program \$100 of the deposit will be refunded. Payment schedules and cancellation deadlines will be included in the application packet.

A non-profit organization | www.andeo.org | info@andeo.org
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