



PLEASE RETURN BY EMAIL TO: pafriesen@pembinatrails.ca OR FAX TO: 204.487.4021

Name of student requesting sleepover: _____
Surname First Middle

Name of student hosting sleepover: _____
Surname First Middle

Names of hosting homestay parent(s): _____

Date of sleepover: _____

For the homestay parent(s) of the ISP student hosting the sleepover:

- Do you allow the ISP student requesting the sleepover (name listed above) to host a sleepover in your home on the date as requested? Yes No
- Will there be a homestay parent present in the home during the sleepover? Yes No

Print Name	Parent Signature	Date

For the homestay parent(s) of the ISP student requesting the sleepover:

- Do you allow your ISP student to attend a sleepover in the home of the ISP student (name listed above)? Yes No

Print Name	Parent Signature	Date

For the biological parent(s) of the ISP student requesting the sleepover:

- Do you allow your child to attend a sleepover in the home of the other ISP student (name listed above)? Yes No

Print Name	Parent Signature	Date

IMPORTANT NOTES:

1. Students are allowed to attend one sleepover and host one sleepover each semester.
2. Upon the approval of their homestay family, students hosting a sleepover may be allowed to invite a maximum of two (2) other students to their homestay family's house.
3. Sleepovers are only allowed between ISP students of the same gender.
4. Signed forms must be submitted at least 3 days before the requested sleepover date.
5. Unauthorized sleepovers by an ISP student are not permitted and could result in disciplinary action.