



Arctic Winter Games 2008 Host Society
Suite 101 - 5109 48th Street
Yellowknife, NT X1A 1N5
Tel: 867.765.2947
Toll Free: 1-877-994-2008
Fax: 867.765.2948
www.awg2008.ca

January 14, 2008

Dear Potential Guests:

We appreciate your interest in the Homestay Program for the 2008 Arctic Winter Games. We recommend visitors stay in private homes, as it is anticipated that accommodations at local hotels and motels will be at a premium during the 2008 Arctic Winter Games.

Please note that our program is for **referral purposes only**. If you require a Homestay accommodation during the 2008 Arctic Winter Games, we will contact you with the name, address and necessary information of your potential Host. You are responsible for your own transportation, meal arrangements and financial agreements. Hosts may agree to provide requested meals for an extra fee, but they are not required to do so. This program operates on a **first come, first serve basis**.

In this document, you will find:

1. Disclaimer
2. Homestay Program Maximum Rates
3. Application forms
4. Accommodation Information

Please review, complete and return the registration form to the Host Society Office by **February 8, 2008**.

Thank you again for your interest in Homestay. Should you have any questions, please do not hesitate to contact us at **867-765-2947**.

Sincerely,

Dana Sipos Randor
Administrative Assistant
2008 Arctic Winter Games

A Celebration of Sport and Culture
March 9th - 15th, 2008

Homestay Program ~ Disclaimer

This program disclaimer applies to all participants in the 2008 Arctic Winter Games Homestay Program including Homestay Hosts, Homestay Guests, and affiliates.

I/We have read and understood the conditions and guidelines outlined in the Yellowknife (2008) Arctic Winter Games Society Homestay Program Information Booklet.

I/We understand that the Yellowknife (2008) Arctic Winter Games Host Society and the City of Yellowknife, including all services, executives, employees and websites are acting as independent agents who are not guaranteeing the quality of the relationship between the Homestay Guest and the Homestay Host, or between the Homestay Guest and the Yellowknife (2008) Arctic Winter Games Host Society, or other relationships.

I/We understand and assume any and all risks related to my participation in this program, and I/We agree to release and hold the Yellowknife (2008) Arctic Winter Games Host Society and the City of Yellowknife harmless and each of their respective employees, agents, and representatives from any and all liability of claims should any injury, loss, or damage occur during this homestay or any other service offered.

I/We understand that if I/we participate in the Homestay Program that I/we will purchase my own insurance whether medical, emergency, liability, damage, home, vehicle and/or any other types of insurance which may be necessary, should any claims, damages or penalties arise. I will contact my insurance broker, travel agent, or insurance provider for more details.

I/We understand that the Yellowknife (2008) Arctic Winter Games Host Society and the City of Yellowknife do not assume any responsibility for any injuries, losses, damages, problems or accidents that might occur during a Homestay Program. I/We further understand that any actions that take place among the Homestay Host and Homestay Guest are not sanctioned by the Yellowknife (2008) Arctic Winter Games Host Society or the City of Yellowknife nor do I hold either the Yellowknife (2008) Arctic Winter Games Host Society or the City of Yellowknife responsible for any reason.

I/We acknowledge that I/We,

- i) have read and fully understand the content of this Program Disclaimer;
- ii) am of the full age of nineteen (19) years;
- iii) am the owner of the premises described in the Homestay Program application;
- iv) have had the opportunity to consult with my attorney, at my discretion; and
- v) am fully aware of the legal consequences of signing this Program Disclaimer.

Dated the _____ day of _____, 2008 in the City of Yellowknife in the Northwest Territories.

Name: _____

Name: _____

Signature: _____

Signature: _____

Witness Name: _____

Witness Name: _____

Witness Signature: _____

Witness Signature: _____

**2008 ARCTIC WINTER GAMES
Homestay Program
Maximum Rental Rates**

We have set maximum rates that are to be charged for the Homestay Program as follows:

Home Rental maximum rates:

Homestay Room Rental maximum rates:

- \$50/ single per night and \$15 extra person per night in the same room.

Homestay Home Rental maximum rates:

- 5-6 bedroom house - \$1,250/ week
- 4 bedroom house - \$1,000/ week
- 2-3 bedroom house - \$800/ week

Please note: no meals are required to be served. If you request meals, you may organize an arrangement with your Host and they will set the extra fee.

Please return your completed application form to the 2008 Arctic Winter Games Office no later than **February 8, 2008** to ensure that you will be matched with an appropriate Host.

Thank you again for your interest in the 2008 Arctic Winter Games Homestay Program. Should you have any questions, please do not hesitate to contact our office.

Sincerely,
Dana Sipos Randor
Administrative Assistant
2008 Arctic Winter Games

2008 ARCTIC WINTER GAMES
Homestay - Room Rental and Home Rental
Guest Registration Forms

Will you be attending the 2008 Arctic Winter Games as:
A Spectator ()
Or a Games Volunteer ()

Please check which program you require:

Homestay- Room Rental ()

Homestay- Home Rental ()

Name: (One family name only)

Number of Persons in Party: Adult _____ Children: _____

Ages of Children: _____

Address:

City: _____ Postal Code: _____

Phone Number(s): Home: _____ Work: _____ Cell: _____

Email: _____

Arrival Date: _____ Time: _____ Via: _____

Departure Date: _____ Time: _____ Via: _____

**2008 ARCTIC WINTER GAMES
Homestay Program
Accommodation Information**

Please check the dates that require your Homestay Accommodations. Please fill in each blank.

	Friday, March 7	Saturday, March 8
Sunday, March 9	Monday, March 10	Tuesday, March 11
Wed. March 12	Thursday, March 13	Friday, March 14
Saturday, March 15	Sunday, March 16	

Do you prefer a smoke-free environment? YES () NO ()	Does anyone in your party smoke? YES () NO ()
Do you prefer a pet free environment? YES () NO ()	Will you have a vehicle? YES () NO ()
Does anyone in your party have allergies? YES () NO () If yes, please specify: _____	Do you need wheelchair accessibility? YES () NO () Are there any special requirements or needs? _____

Additional Information you would like us to know:
