



# HAGERSTOWN SUNS HOST FAMILY FORM



## GENERAL INFORMATION

Host Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone & Cellphone: \_\_\_\_\_

Distance from Municipal Stadium: \_\_\_\_\_

## PLEASE CHECK ALL THAT APPLY

House: \_\_\_\_\_ Apartment: \_\_\_\_\_ Bedroom: \_\_\_\_\_ Basement: \_\_\_\_\_ Baths: \_\_\_\_\_

## HOST FAMILY INFORMATION

Number of Adults: \_\_\_\_\_ Number of Children (Sex & Age) \_\_\_\_\_

Number of Pets & Type: \_\_\_\_\_

Other Information:

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## PLEASE FILL OUT WHAT BEST SUITS YOU

Number of Players: \_\_\_\_\_ Player and Significant other?: \_\_\_\_\_

Do you speak any other languages?:

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Email completed forms to:  
Tom Burtman  
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301-791-6266 ext. 102