



First and foremost, thank you for your interest in becoming a billet home in partnership with the Charleston Colonials. We have amazingly talented teams planned for the upcoming season and are excited about the possibility of your involvement with us in 2025-2026 season.

Please fill out the following information to help us place the right player in your home and if you have any questions or need further information, please feel free to call, text or email me at anytime.

Sincerely,

***Terri Mills***

**[billeting@charlestoncolonials.com](mailto:billeting@charlestoncolonials.com)**

**(843) 343-7812**

## Charleston Colonials Billet Home Information

Your name: \_\_\_\_\_

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

City: State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Billet Mother Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Billet Mother occupation: \_\_\_\_\_

Billet Father Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Billet Father occupation: \_\_\_\_\_

Do you have children living in the household?: ☐ Yes ☐ No

If yes, list Names/Ages of children:

\_\_\_\_\_  
\_\_\_\_\_

Is this your first time participating as a billet family? ☐ Yes ☐ No

Do you have regular meal schedules? ☐ Yes ☐ No

Does anyone in your home smoke? ☐ Yes ☐ No

Do you have Internet access in the home? ☐ Yes ☐ No

Do you have parking available for a player with a vehicle? ☐ Yes ☐ No

Do you have pets? ☐ Yes ☐ No

If yes, list types/breeds of pets:

\_\_\_\_\_  
\_\_\_\_\_

Describe the living space available to the player (i.e. private room? Private bathroom/shared bathroom?):

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Please supply us with any other information you feel would help us with placing a player in your home:

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Please return completed questionnaire to:

Terri Mills, Billet Coordinator by email – [billeting@charlestoncolonials.com](mailto:billeting@charlestoncolonials.com)

*\*All information provided will be kept strictly confidential among the appropriate Charleston Colonials staff.*