



**CHILDREN'S TRANSPLANT INITIATIVE'S TEMPORARY HOUSING GUIDELINES  
SPONSORED BY EXPRESS CORPORATE HOUSING**

Primary Guest Full Name	
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Initials	**LEGAL NOTICE**
	Please read, acknowledge your understanding of, and agreement to, the conditions of your application with Children's Transplant Initiative (CTI) for a personal license to use CTI's "R"Rooms temporary housing. By initialing to the left and signing below; you are acknowledging that you understand and are agreeing to all of the "R"Rooms Housing Guidelines.
	All Guests agree to indemnify and hold Children's Transplant Initiative, its officers, directors, agents and assigns harmless from any and all liability of any kind whatsoever arising out of or in any way connected with their stay at Children's Transplant Initiative housing facility; including, but not limited to all common areas of the apartment complex such as the pool, gym, gameroom.
	All Guests agree to indemnify and hold CTI's housing sponsor, Express Corporate Housing, LLC, its officers, directors, agents and assigns harmless from any and all liability of any kind whatsoever arising out of or in any way connected with their stay at Children's Transplant Initiative housing facility; including, but not limited to all common areas of the apartment complex such as the pool, gym, gameroom.
	You understand, acknowledge and agree that your use of CTI's "R"Rooms temporary housing is a personal license only, that may be terminated at any time by Children's Transplant Initiative. Your occupancy of CTI's "R"Rooms housing facility is not a lease nor does it constitute a tenancy of any kind. If you fail to vacate CTI's "R"Rooms housing facility when requested, you will be trespassing.
	Guests have been provided information on the property and CTI's temporary housing program and CTI has agreed to furnish such guest accommodations. I recognize that any donation(s) to CTI, which I may have made, represent only a small portion of the value of accommodations offered.
	I hereby grant CTI permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration. <b>*Accept or *Decline.</b> (circle one)

Initials	APPLICATION AND REFERRAL
	All referrals must be confirmed and approved by a Texas Medical Center Pediatric transplant center physician or social worker.
	Children's Transplant Initiative housing program is reserved for pediatric transplant patients and their families who must travel from out of town to the Texas Medical Center for treatment, regardless of whether services are considered inpatient or outpatient.
	Guests must have a back-up plan. All services depend on the availability of housing accommodations.
	All Applications for services must be completed and received no later than 5 working days prior to housing need. <b>Complete application</b> must provide appropriate patient and Guardian information. Referral must have <b>signature of guest's transplant social worker or referring physician</b> with contact numbers and specific days of treatment.
	The length of stay approved will be determined by Children's Transplant initiative after review and verification of dates submitted for housing with a maximum of 90 days. Validation is at the discretion of Children's Transplant Initiative and unconfirmed treatment will result in dismissal from CTI's "R"Rooms housing assistance. CTI provides temporary housing; it is not a long term-care facility.
	Each stay requires the completion of a new Application and Housing Guidelines and approval from Children's Transplant Initiative.
	Guardian and family members 18 years old and older, will be subject to background checks and verification of all information provided.
	Approved Guests must notify Children's Transplant Initiative at least 24 hours in advance of their arrival and departure to confirm dates

	and times at 713-301-4936.
	If there is a change in travel plans, it is the guest's responsibility to notify Children's Transplant Initiative as soon as possible and no later than 24 hours prior to scheduled arrival at 713-301-4936. Failure to make notification may cause guest to forfeit the ability to receive future services.

Initials	CONDITIONS THAT MUST BE ACCEPTED
	Guests who fail to adhere to the Children's Transplant Initiative "R"Rooms Housing Guidelines will have their license terminated and are subject to immediate dismissal from the housing provided and may become ineligible for future housing assistance. Guests may have his/her license terminated and be asked to leave the housing provided if the guest, family member, friend or other invitee fails to adhere to the Housing Guidelines.
	All Guardians must be 21 years of age or older.
	Guests are responsible for all of their own transportation.
	Guests must provide a security deposit of \$250 one week prior to anticipated date of check-in. An inventory must be completed by the applicant upon arrival (within 24 hours of check-in) and submitted to CTI. A general inventory will also be conducted by housekeeping upon check-out/departure. All personal charges, including but not limited to room damages, movies, entertainment or any other amenities that have a fee and any items damaged or taken from the facility, including keys and keyless entry devices, are the guest's sole responsibility and may be charged against the deposit put up by the guest. The deposit will be refunded upon final cleaning of the unit (after check-out) provided that the apartment is in good repair and condition. Should there be damages or loss, the primary applicant will be notified of charges incurred which will be deducted from the applicant's security deposit. Primary applicants are responsible and will be held financially liable for the actions and/or behavior of their guests while on CTI premises.
	Guests should make every effort not to waste electricity. Please turn off lights when you leave each room and leave doors and windows closed so as to keep apartments cool in the summer and warm in the winter. This also prevents bugs from entering the apartments. <b>Electricity usage charges over \$150/month will result in a charge to the primary housing applicant.</b>
	It is the responsibility of the guest to notify CTI no less than 24 hours before any absence during an approved stay. If the guest is absent for more than 4 days in a seven-day period the reservation will be cancelled and the guest will need to re-apply for a new stay period, unless CTI has previously approved a separation in the stay.

Initials	CTI's "R"ROOMS HOUSING RULES
	Check-In Time will be by appointment between 4:00pm-6:00pm. No late check-ins. Checkout time is 12:00pm.. Keys will be returned as instructed.
	One week prior to arrival, Children's Transplant Initiative will collect a \$250 deposit in check or credit card to be held until guest checks out and the premises inspected for unpaid charges, damages or loss. A current photo ID of all persons 18 years or older is required for check-in.
	<b>No Smoking or Pets</b> - It is important to provide a clean, allergen-free environment for patients. The apartments are subject to a strict no smoking and no pets (of any kind) policy.
	No firearms or weapons of any kind are allowed, including, without limitation, concealed weapons that are licensed.
	Guests must dispose of their own trash according to the guidelines of the apartment facility.
	Basic cable and internet will be provided.
	Bedding and towels will be provided upon check-in. Prior to checkout guests are responsible for cleaning all areas used, including putting all linens and towels in the washer. Guests agree to leave premises reasonably clean upon departure; otherwise, guests will be charged a \$150.00 cleaning fee.
	Children's Transplant Initiative is not responsible , for lost, left-behind or stolen items, or for injuries suffered or for accidents on the premises.

Initials	APPROVAL BY CHILDREN'S TRANSPLANT INITIATIVE
	Children's Transplant Initiative will notify guest by the preferred contact method indicated by you no later than 24 hours before the requested arrival date whether the application has been approved and housing is available. If they have not been notified by such time, they should contact CTI at 713-301-4936.
	Any person who, in the sole opinion of Children's Transplant Initiative has been, is or is likely in the future to be disruptive or harmful to other guests in the apartment facility, must vacate the premises immediately upon the request of Children's Transplant Initiative and failure to do so will result in such person or persons being guilty of trespass.
	I understand that I am a guest of Children's Transplant Initiative "R"Rooms Housing program under a personal license and will vacate the premises immediately if asked to do so by a CTI representative. If I fail to leave the house within three (3) days from the date requested. I agree that I will be responsible for and will pay a fee of \$150/day for each day thereafter until the premises are fully vacated. I understand that \$150/day fee constitutes liquidated damages for my failure to leave and agree that it is a reasonable amount to compensate Children's Transplant Initiative for the damages it will suffer as a result of my failure to vacate when requested
	In conjunction with this application, I agree and consent to a background check being performed on me by Children's Transplant Initiative or its agent which may include all or some of the following: performing a criminal background check; and obtaining such additional background information as Children's Transplant Initiative deems necessary. I hereby authorize any party contacted by Children's Transplant Initiative to furnish all requested information and that a copy of this authorization with my signature shall have the same authority as the original. To the best of my knowledge all information contained in this application is accurate.

<b>Primary Guest Name</b>	<b>Primary Guest Signature</b>	<b>Date</b>

Children's Transplant Initiative verifies all applications with the submitted referral source to determine eligibility. By submitting this application, you are authorizing Children's Transplant Initiative to verify with the referral source or hospital the information submitted herein.

**Please submit by email to: [housing@cti-tx.org](mailto:housing@cti-tx.org)**