

## **Application for Residence**

ROSEDALE MANOR 10053 – 111 Street \*T5K 2H8 ROSEDALE ESTATES 10101- 111 Street \*T5K 2W4 ROSEDALE ON THE PARK 10103 – 111 Street \*T5K 2Y1 ROSEDALE VILLA 10107 – 111 Street \*T5K 2Z1

Phone: 780-425-1668

Name (in full):					Birthdate (M/	D/Y):	
	Last	First	Middle				
Name (in full):					Birthdate (M/	D/Y):	
	Last	First	Middle				
Current Address:							
City:		Postal Code:	ostal Code: Email Address:				
Telephone:		Date Available to Move:					
CONTACT PERSO	ON(S):					_	
1) Name:			Emai	il Address:			
Current Address:			City:		Province:	Postal Code:	
Phone Number:		Cell Number:			Relationship:		
2) Name:			Emai	il Address:			
						Postal Code:	
Phone Number:		Cell Number:			Relationship:		
Name of Physician	n:		Phone:		F	ax:	
Downtown: Accommoda		Estates   Bedroom Standard	-			□ Villa □ n Grand □ 2 Bedroom □	
Are you able to d	lress and care	for yourself?   Ye	s 🗆 No				
Are you currently	y receiving Ho	ome Care services?	☐ Yes ☐ N	O			
Hobbies/Interests	s:						
Living may disclo	se information		elieved the disc	closure is rec		s thereof. Rosedale Seniors' /We agree that the information	
Signature:		Date:					
Other:							

Fax application to (780) 428-5522 or Email to <a href="mailto:hayley.w@rosedaledevelopments.com">hayley.w@rosedaledevelopments.com</a>