Butternut Manor
Retirement Living... Among Friends

Application for Residence

BUTTERNUT MANOR RETIREMENT HOME

Butternut Manor
3 Norm Goodspeed Drive
Uxbridge, ON L9P 0B7
(905) 852-6777 · Toll free (888) 852-6778
info@butternutmanor.com

Retirement Living... Among Friends

APPLICANT

TITLE
☐ Mr. ☐ Mrs. ☐ Miss

FIRST NAME | FAMILY NAME | INITIAL

PRESENT ADDRESS — NO. & STREET | APT. #

CITY | PROVINCE | POSTAL CODE

TELEPHONE NUMBER

STATUS
☐ Single ☐ Married ☐ Widowed ☐ Divorced

IF MARRIED, NAME OF SPOUSE

BIRTH PLACE — CITY | PROVINCE | COUNTRY

DATE OF BIRTH —
DAY | MONTH | YEAR | LANGUAGE(S) SPOKEN

HEALTH CARD NO. | VERSION CODE

FINANCIAL RESPONSIBILITY

☐ Self ☐ Other

If "Other", please provide us with the necessary information and instructions:

NAME | RELATIONSHIP

ADDRESS

PHONE — HOME | WORK | OTHER

COMMENTS

POWER OF ATTORNEY (if any)

NAME | RELATIONSHIP

ADDRESS

PHONE — HOME | WORK | OTHER

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CONTINUED

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3 Norm Goodspeed Drive, Uxbridge, ON

NEXT OF KIN OR FRIENDS

To help us reach your loved ones for special occasions, receptions, etc., please provide us with the following:

CONTACT 1

NAME | RELATIONSHIP

ADDRESS

PHONE — HOME | WORK | OTHER

CONTACT 2

NAME | RELATIONSHIP

ADDRESS

PHONE — HOME | WORK | OTHER

CONTACT 3

NAME | RELATIONSHIP

ADDRESS

PHONE — HOME | WORK | OTHER

ACCOMMODATION

REQUESTED ACCOMMODATION

☐ Single ☐ Couple

TYPE OF ACCOMMODATION

DATE ACCOMMODATION REQUESTED | ROOM NUMBER ASSIGNED *(office use)*

SPECIAL INSTRUCTIONS

OTHER INFORMATION (optional)

To help us plan appropriate activities, please complete the following:

RELIGION | PREVIOUS OCCUPATION

HOBBIES OR INTERESTS

CLUB MEMBERSHIPS

DATE | SIGNATURE OF APPLICANT