



DATE RECEIVED:

Luther Heights

Rental Application Form

Luther Heights' waiting list is maintained on a "first come, first served" basis. When suites become available they are offered to those on the waiting list in order of sequence.

NAME(S):		
PHONE:		
ADDRESS:		
CITY/TOWN/POSTAL CODE:		
DATE OF BIRTH:		
DATE OF BIRTH SPOUSE:		
ALTERNATE CONTACT PERSON:		
SUITE PREFERENCE:	<input type="checkbox"/> ONE BEDROOM	<input type="checkbox"/> TWO BEDROOM
PLEASE LIST ANY MEDICAL CONDITIONS YOU HAVE:		
<p>To help minimize the possibility of misunderstanding and disappointment, our policy for residency at Luther Heights is summarized here:</p> <p><i>Each apartment is a fully accessible, private residence for seniors who are in good physical and mental health. They must be able to live alone and tend to all their personal needs without assistance or they must be prepared to allow us to help arrange support services sufficient to continue independent living.</i></p> <p>When your name comes up on the waiting list you will be asked to provide us with a doctor's report indicating any health issues. We will also ask that you allow us to assess your needs prior to offering you a unit in order to ensure that we are able to adequately meet your needs.</p> <p>Please note that Luther Heights is a non-smoking facility – this includes in suites and on balconies and grounds. As well, Luther Heights has a "No Pets" policy.</p>		
Signature:		Date: