



# Waiting List Application Form

## Applicant 1

## Applicant 2

Title	First Name	Title	First Name
Last Name		Last Name	
Street Address		City	Prov PC
Home Phone	Cell Phone	Email	
Date of Birth	Date of Birth		

*[Date of birth information is required to confirm eligibility. At least one of the applicants must be 65 yrs. of age upon residency.]*

Please contact the following individual(s) in the event that I/we cannot be reached:

## Alternate Contact 1

## Alternate Contact 2

Title	First Name	Title	First Name
Last Name		Last Name	
Relationship		Relationship	
Home / Cell Phone	Email	Home / Cell Phone	Email

We will make a concerted effort to contact you. However, if we are unable to reach you or your alternate contact(s) within two business days, we will advance to the next name on the Waiting List.

- I/We would like to be placed on the Waiting List.** *Being on the Waiting List means that you are ready to accept a suite when/if you receive a call from The Meadows of Aurora.*
- I/We are members of York Region Christian Senior Homes Inc. (YRCSHI).** *Applicants must be Members of YRCSHI to be on the Waiting List.*
- I/We have attached the \$2,500 Waiting List Security Deposit.** *Please make cheque payable to York Region Christian Senior Homes Inc. (YRCSHI).*
- I/We understand that should any of the above information change, it is my/our responsibility to inform The Meadows of Aurora of the change(s).**
- I/we also acknowledge that should I/we decline a unit that is within the specified preferences, my/our name(s) will be removed from the Waiting List.**

Applicant 1 Signature	Applicant 2 Signature
Date	Date

MEMBERSHIP # \_\_\_\_\_

**Please indicate your preferences:**

Note: The more specifications you choose, the longer your wait may be.

**Financial**

- Life Lease Purchase
- Rental
- No Preference

**Building**

- Phase 1A
- Phase 1B
- No Preference

**Floor**

- First
- Second
- Third
- Fourth
- Fifth
- Sixth
- No Preference

**Other Specifications:**

Suite Name	QTY	Sq Ft	Floor Level	Building	Bed Rooms	Bath Rooms	Bathtub / Shower	Add to Wait List
Iris	6	706	ALL	1A	1	1	S	<input type="checkbox"/>
Marigold A	6	972	ALL	1A	2	2	S	<input type="checkbox"/>
Marigold B	6	972	ALL	1A	2	2	S	<input type="checkbox"/>
Aster	6	981	ALL	1A	2	1	S	<input type="checkbox"/>
Primrose A	3	1052	3,5	1A	2+Den	2	S	<input type="checkbox"/>
Primrose B	2	1052	1,6	1A	2+Den	2	B & S	<input type="checkbox"/>
Indigo A	15	1052	ALL	1A	2	2	S	<input type="checkbox"/>
Indigo B	4	1052	2,3,4,5	1A	2	2	B & S	<input type="checkbox"/>
Daylily A	6	1107	ALL	1A	2	2	S	<input type="checkbox"/>
Daylily B	6	1107	ALL	1A	2	2	S	<input type="checkbox"/>
Laurel	5	1240	2,3,4,5,6	1A	2	2	S	<input type="checkbox"/>
Trillium A	6	1255	ALL	1A	2	2	S	<input type="checkbox"/>
Trillium B	6	1255	ALL	1A	2	2	S	<input type="checkbox"/>
Iris	6	739	ALL	1B	1	1	S	<input type="checkbox"/>
Crocus	6	875	ALL	1B	1	1	S	<input type="checkbox"/>
Marigold A	6	967	ALL	1B	2	2	S	<input type="checkbox"/>
Marigold B	6	978	ALL	1B	2	2	S	<input type="checkbox"/>
Indigo	6	1052	ALL	1B	2	2	B & S	<input type="checkbox"/>
Daylily A	6	1103	ALL	1B	2	2	S	<input type="checkbox"/>
Daylily B	6	1103	ALL	1B	2	2	S	<input type="checkbox"/>
Avens	6	1142	ALL	1B	2	2	S	<input type="checkbox"/>
Chicory	6	1227	ALL	1B	2	2	S	<input type="checkbox"/>
Laurel	5	1240	2,3,4,5,6	1B	2	2	S	<input type="checkbox"/>
Trillium A	6	1257	ALL	1B	2	2	S	<input type="checkbox"/>
Trillium B	6	1257	ALL	1B	2	2	S	<input type="checkbox"/>
Dewberry	6	1382	ALL	1B	2	2	B & S	<input type="checkbox"/>