



ROSEBUD VILLAGE

APPLICATION FOR RESIDENCE

PLEASE answer each question: ALL information is CONFIDENTIAL

SURNAME:GIVEN NAMES:

Male / Female (please circle) Please indicate preferred title Mrs Miss Ms

ADDRESS:

.....

.....POSTCODE.....

PHONE NUMBER: H.....M.....

EMAIL ADDRESS:

DATE OF BIRTH:PLACE OF BIRTH:

PENSION NO:REPATRIATION NO:

MEDICARE NO:EXPIRY DATE:

DO YOU OWN A PET:TYPE OF PET:.....

I HEREBY APPLY FOR: *(Please select all that apply)*

- One Bedroom Unit
- Two Bedroom Unit
- One Bedroom Plus study Unit *(Please note there are only 3 in total of this style)*
- Carport to be leased

PLEASE NOTE: Unit prices are subject to change without prior notice.



ROSEBUD VILLAGE

NEXT OF KIN or POINT OF CONTACT

1) Name:

Address:

..... POSTCODE :

Relationship:PHONE:

2) Name:

Address:

..... POSTCODE :

Relationship:PHONE:

3) Name:

Address:

..... POSTCODE :

Relationship:PHONE:

SOLICITOR: Name:

Address:

Phone:

POWER OF ATTORNEY:

Name:

Address:

Phone:



ROSEBUD VILLAGE

I HEREBY AGREE to pay a sum of TWO THOUSAND (\$2,000) dollars as a waiting list deposit and understand that if I withdraw this application the two thousand dollars is refundable within thirty (30) days of written notice. I also understand that no interest is payable on the deposit and that a 10% management fee will be deducted.

I confirm that I am living independently and expect to continue to live independently upon moving into the Village. I acknowledge that I will need to complete a medical assessment with my regular Doctor to confirm my ability to live independently prior to moving into an independent unit at Rosebud Village.

Your completion of this application form gives consent to the use or disclosure of this information only in a manner that will assist you and for the purpose for which it is provided. This consent also applies to the transfer of any health or medical information from a treating practitioner as part of our service provision.

Attached as required by the Retirement Villages Act 1986:

- Licence Agreement document
- Fact sheet

I CERTIFY THAT, to the best of my knowledge the foregoing is a true and correct statement and I AGREE THAT, subject to admission to the Village; I will observe the rules and regulations and will endeavour to live in harmony with my fellow residents.

SIGNATURE:

DATE:

WITNESSED BY:

WITNESS SIGNATURE:

ADDRESS OF WITNESS:

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.....POSTCODE.....