



Application for residency

Return to _____
The Meth-Wick Community
1224 13th Street NW • Cedar Rapids, IA 52405
Phone 319-365-9171 • Fax 319-363-5312
methwick.org

Please complete one application form per person.

All admissions to The Meth-Wick Community, Inc. will be reviewed and are subject to approval. Information considered includes the application form information presented in the financial forms, and information resulting from a home visit and assessment by a Meth-Wick staff member. Along with this application form, please enclose a completed financial form and an application fee of \$500.

Exceptions are as follows:

- Arbor Place: No application fee. Deposit required. Daily rate applies.
- The Woodlands: No application fee. Daily rate applies.
- Respite Suites: No application fee. Payment in advance required. Daily rate applies.

Name: _____ Email: _____

Home phone: (_____) _____ Cell phone: (_____) _____

Address: _____
Street City State ZIP

Date of birth: _____ SSN: _____ - _____ - _____
Month, Day, Year

Sex: M F Marital Status: M S D W Present Age: _____

- The building(s) I am interested in:
- The Manor - *Independence Plus*
 - Arbor Place - *Assisted living*
 - The Manor - *Assisted living*
 - The Woodlands - *Skilled nursing*
- Independent living:*
- Brendelwood Village
 - Deer Ridge
 - Greenwood Terrace
 - Highland Park
 - Oakwood

- Type of unit(s) I am interested in:
- Studio
 - One bedroom
 - Two bedroom
 - Extra large two bedroom
 - Three bedroom

Alternate contacts (*List in order of preference, if applicable*)

1. Name: _____ Relationship: _____

Address: _____
Street City State ZIP

Home phone: (_____) _____ Cell phone: (_____) _____

2. Name: _____ Relationship: _____

Address: _____
Street City State ZIP

Home phone: (_____) _____ Cell phone: (_____) _____

I realize that the \$500 application fee is refundable should my application not be accepted.

Applicant Signature Date