



Waiting List Application
 Parkwood Suites Retirement Residence
 720 New Hampshire Street
 Waterloo, ON N2K 0A3

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: (_____) _____ EMAIL: _____

ACCOMMODATION REQUESTED

Fully Independent Living Apartment

One bedroom Two bedroom

Supportive Apartment

One bedroom Two bedroom

Full-Service Assisted Living Suite

Studio – A Suite 1 Bedroom – B, C, D,AA

ALTERNATE CONTACT INFORMATION To be contacted first, please check

Name: _____ Relation: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (H): (_____) _____ Alternate No.: (_____) _____

E-mail : _____

I request to be placed on the waiting list at Parkwood Suites Retirement Residence for the accommodation checked above. It is understood that I will be contacted in the event accommodation becomes available. I further understand that this application does not commit me in any way to enter into a tenancy agreement at Parkwood Suites.

I also acknowledge it is my responsibility to inform Parkwood of any changes to the above information.

Signed _____ Dated _____

Office Use Only

Date: _____ Comments: _____

 day/month/year