

Michael Batt Charitable Trust

Rushymead Residential Care Home
Tower Road
Coleshill
Amersham
Buckinghamshire
HP7 0LA



Application for Residence

Full Name:

Present Address:

.....

Date of Birth: **Marital Status:**

Any social, cultural or religious traditions you may require to be kept:

.....

Next of Kin

Name:

Address:

.....

Telephone: **Relationship:**

Name of Your Doctor:

Are You Mobile: Yes No

Do you need help with any of the following? If yes, please give details:

Washing & Dressing

Bathing

Hair Care

Special Diet

Please tick this box if you wish to be placed on our waiting list.

Signature: **Date:**

This information will be treated in the strictest confidence.

