

Residential Care Application Form

SEEKING:	Respite	Permanent				
Date						
Surname		Given Names	5			
D.O.B		Marital Statu	ıs			
Country of Birth		Languages	Spoken			
Medicare Card Number DVA/Pension Number						
Have any of your imme	diate family members S	erved? Yes	No T	ype		
Next of Kin		Re	elationship			
NOK Contact Number/s						
General Practitioner		Con	tact Numb	er		
FINANCE – Permanent						
Accommodation costs vary depending on a resident's assets and income. An Accommodation Payment can be paid via a Refundable Accommodation Deposit, a Daily Accommodation Payment, or a combination of both. Some residents may have their accommodation paid in full or in part by the Australian Government once a Combined Income and Assets Assessment has been completed.						
Please indicate which accommodation price you are interested in, or if you expect to be eligible as Low Means. Our accommodation pricing is as follows:						
Angle Park:	\$350,000	Low Means				
Myrtle Bank:	\$550,000	\$450,000	Ş	5275,000	Low Means	
FINANCE – Respite						
Do you hold a DVA Card?			Yes	No		
Have you used any respite this financial year?			Yes	No		
If yes, please specify how many days you have used						



MEDICAL - Please complete the following questions

What are your current health care needs?
Are there any other concerns you would like to tell us about?
Have did you been about we?
How did you hear about us?

Thank you for your application. To be placed on our residential care waiting list, kindly return this form along with a copy of your 'Aged Care Client Record' or 'My Support Plan' to 55 Ferguson Avenue, Myrtle Bank SA 5064 or email to warvets@rslcaresa.com.au.