



Resident has been informed of - CARE OF RESIDENT'S PERSONAL BELONGINGS, and agrees that Residentia Senior Lifestyle Centre will take no responsibility for loss or damage to personal belongings.

SIGNED BY ON THIS DAY OF 20

AT

RESIDENT OR REPRESENTATIVE | WITNESS

RESIDENT
SIGNATURE

RESIDENT

WITNESS
SIGNATURE

WITNESS

REPRESENTATIVE
SIGNATURE

REPRESENTATIVE

WITNESS
SIGNATURE

WITNESS

STAFF MEMBER | WITNESS

RECEIVED BY
STAFF MEMBER
(NAME/SURNAME)

STAFF MEMBER

WITNESS
SIGNATURE

WITNESS

STAFF
MEMBER
SIGNATURE

STAFF MEMBER