

# Eatonia Oasis Living Application

Box 217 Eatonia, Saskatchewan S0L 0Y0

Phone (306) 967-2447 Fax (306) 967-2434

Email: eatoniaoasisliving@gmail.com

## Resident Information

<b>Name</b>	
<b>Address</b>	
<b>Town, Province, Postal Code</b>	
<b>Home Phone</b>	
<b>Cell Phone/Other</b>	
<b>Saskatchewan Health Number (or other)</b>	

## Contact Information/Next of Kin

<b>Name/Relationship to Applicant</b>	
<b>Home Phone</b>	
<b>Cell Phone/Other</b>	

## Contact Information/Next of Kin

<b>Name/Relationship to Applicant</b>	
<b>Home Phone</b>	
<b>Cell Phone/Other</b>	

## Contact Information/Next of Kin

<b>Name/Relationship to Applicant</b>	
<b>Home Phone</b>	
<b>Cell Phone/Other</b>	

## Room Preference (If Available)

<input type="checkbox"/>	<b>Share</b>	<input type="checkbox"/>	<b>Permanent</b>
<input type="checkbox"/>	<b>Private</b>	<input type="checkbox"/>	<b>Respite</b>

Signature of Applicant or Supporter

Date

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