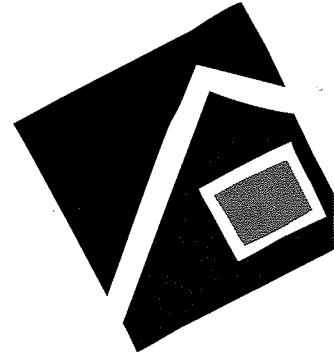




Please complete a separate form for each person

Thank you for your interest in Kendal at Hanover. In order to join the Wait List, please complete this form, along with the Health Care Record and Financial Statement. This should also be accompanied by a deposit of \$1,500/per person (\$500 of which is non-refundable.) The remaining \$1,000 will either be refunded, if you withdraw your application, or will be applied to your entry fee.



Name _____
First Middle Last

Primary address _____
Street City State Zip

Mailing address (if different) _____

Telephone _____ Cell phone _____

E-mail address _____

Date of birth _____
Month Day Year

Marital status _____

Name of college(s) attended _____

Level of education attained _____ Current/Former occupation _____

Approximate date for residence at Kendal at Hanover _____

80 Lyme Road
Hanover, NH 03755
(603)-643-8900
www.kah.kendal.org



Apartment type desired at Kendal at Hanover - Please circle your choices and indicate order of preference.

Studio A	Studio B	1BR	1BR/Den	1BR/Den Single Story
2BR	2BR/Single Story	2BR/Den	2BR/Den Single Story	

Would you be interested in other Kendal communities?

How did you learn about our community?

Please name someone who can contact you when you are away from your current home

Name

Relationship

Address

Telephone

Name

Relationship

Address

Telephone

Please note that submittal of your application initiates your admission process at Kendal, but does not guarantee acceptance or secure your name on our Wait List. We recommend that you contact us periodically, to keep us informed of your situation, especially if you've had an appreciable change in health or finances.

Applicant's signature

Date

Kendal at Hanover

Date

