

## Assisted Living Reservation Agreement

\_\_\_\_\_ Applicant(s) hereby deposit(s) \$500.00 with Mary, Queen of Angels. This deposit is a non-refundable deposit, unless at the time of occupancy, the applicant no longer qualifies for assisted living.

This Residency Agreement expires five days after the unit is available for occupancy, or thirty (30) days from the date of this agreement, whichever is later.

Applicant understands that upon occupancy the \$500.00 deposit will be credited to a refundable Security Deposit. Upon Resident vacating the premises, Mary, Queen of Angels shall have forty-five (45) days to either (1) Return the Security Deposit, or (2) Provide Resident written notice of its intention to impose a claim on the Security Deposit and reason for imposing the claim.

Name(s) \_\_\_\_\_ Birthdate \_\_\_\_\_

\_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date \_\_\_\_\_

Signature of Applicant(s) \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

Please make your check payable to Mary, Queen of Angels, and return it with a signed copy of this agreement to the Marketing Office, either in person or by mail. Your interest in Mary, Queen of Angels is truly appreciated.

