



APPLICATION TO LIVE IN VIEWLANDS HOUSE REGISTERED CARE HOME

Please complete in block letters)

Full Name Mr, Mrs, Miss etc.)

Married/Single/Widow/Widower.....Date of birth.....

Address.....

.....Telephone no.....

National Insurance Number

Religion

Next of kin (1).....Relationship.....

Address.....

.....Home Tel No.....

Tel No.mob)Email

Next of kin (2).....Relationship.....

Address.....

.....Home Tel No.....

Tel No.mob)Email

Power of Attorney - Welfare

Name Tel No.....

Address.....

Power of Attorney - Financial

Name Tel No.....

Address.....

Doctor.....Tel No.....

Address.....

Medical History:

Past serious illnesses

Past operations

Medicines currently being taken.....

.....

.....

Can you walk unaided? yes / no

If not, what walking aid do you use?.....

Are you in a wheel chair? yes / no

If so, can you propel yourself? yes / no

Can you see a) well b) not very well c) not at all?

Can you hear a) well b) not very well c) not at all?

Do you require help with:-

 getting up from bed or chair yes / no

 dressing yes / no

 going to the lavatory yes / no

 washing yes / no

 bathing yes / no

 eating or drinking yes / no

 do you need a special diet yes / no

 If YES, what special requirements do you have?

 do you have trouble with your bladder yes / no

 do you have trouble with your bowels yes / no

 do you smoke yes / no

**Please Note -
The Abbeyfield Perth Society operates a No Smoking Policy.**

5. I understand that Viewlands House provides Nursing Care if required but that a separate arrangement will be made with the resident and their family / Care Manager where a resident has dementia and it is felt that Viewlands House is no longer able to meet their needs. In this event it may, therefore, be necessary for the resident to transfer to a more suitable environment.

6. If I wish to leave I undertake to give the Society two months notice in writing of my intention to do so.

Signature..... Date.....

Or Signed on behalf of

By (PRINT NAME)

Signature..... Date.....

Acting in what capacity?

When completed, this form should be returned to:

**The Manager
The Abbeyfield Perth Society Limited
Viewlands House, 25 Viewlands Road
Perth, PH1 1BL**

(April 2023)