

RMBCare Co. Resident application form

Respite care or permanent residence



The applicant

First name: _____
Last name: _____
Date of birth: _____
Address 1: _____
Address 2: _____
Address 3: _____
Telephone no: _____
Email address: _____

Primary contact:

First name: _____
Last name: _____
Address 1: _____
Address 2: _____
Address 3: _____
Telephone no: _____
Email address: _____
Relationship to applicant: _____

Secondary contact (optional):

First name: _____
Last name: _____
Address 1: _____
Address 2: _____
Address 3: _____
Telephone no: _____
Email address: _____
Relationship to applicant: _____

When would you like to move / stay at the Home?

- ☐ As soon as possible
☐ At a later date (please specify) _____

Placement type (if known) ☐ Residential ☐ Nursing ☐ Residential dementia
☐ Respite stay (Respite fees paid on admission for full stay period.)
☐ Permanent stay

If you are applying for permanent residence, how will your placement be funded? (If you are unsure, or do not fall into any of the following categories, please contact the Home's Business Relationship Manager to discuss.)

- ☐ I will be self-funding. I have two years' funding and this will not involve selling a property. (Proof of funding will be required before any permanent admission.)
- ☐ I will be self-funding and I will need to sell my property to fund my placement immediately or at a later date. (Further financial information will be required before admission.)
- ☐ My Local Authority or NHS will be fully funding my placement. (Confirmation of funding will be required before admission from statutory agency.)
- ☐ Other - (Further financial information may be required before admission.)

Are you a Freemason or do you have Masonic eligibility? ☐ Yes ☐ No

If you answered yes, please provide the following information about the Freemason (Please refer to eligibility criteria on rmbi.org.uk):

First name: _____

Last name: _____

Relationship to Freemason (Note: Proof of marriage is required prior to admission.)

Date of birth: _____

Lodge (if known): _____

Province (if known): _____

Privacy Statement: We are committed to respecting and protecting your privacy. We will only use your personal information to send you information relating to RMBI Care Co. that you have requested to receive from us. RMBI Care Co. will store your details and we will continue to request consent on a regular basis. You can withdraw consent at any time by sending an email to enquiries@rmbi.org.uk or by writing to RMBI Care Co., 60 Great Queen Street, London WC2B 5AZ. We will not share your information with any third parties or store your details outside of the European Economic Area. The information you provide will be held securely by us whether the information is in electronic or physical format and we will only use your data to send you news relating to RMBI Care Co. unless you have consented otherwise.