

HEIDEHOF . . . The People Place
Membership - Page 1 of 1

Membership to the Benevolent Society “Heidehof” For The Care Of The Aged is open to anyone who subscribes to the goals and objectives of heidehof. Heidehof provides a continuum of care for anyone over sixty years of age in a variety of residential and care settings. Programs, activities and care are designed to achieve quality of life in physical, mental and spiritual health. The dignity of residents is recognized by respecting their rights and freedoms. Our uniqueness lies in our ability to serve the German ethnic, linguistic, and cultural needs of those under our care.

We believe in the uniqueness and value of each individual and the necessity to respect the culture, ethnicity, family traditions, community, language, and spiritual beliefs of those whom we serve.

We believe in the non-profit model of service delivery which enhances community accountability and removes the inherent conflict between the two goals of quality service and profit.

We believe in the commitment to quality of life and individual services for seniors and our ability to deliver such programs and services.

We believe in establishing service priorities based on the efficient and effective use of available resources.

Membership gives you personal satisfaction in supporting valuable services to seniors in our community. For a modest annual fee of \$12.00, you can receive the corporation’s Newsletters throughout the year and attend, as well as participate in, Annual and Special Membership meetings of the corporation. As well, you have th opportunity to give back to your community through participation on the Board of Directors and/or is various committees. Simply fill out the balance of this page, include the appropriate cheque, and mail to Heidehof.

Application for membership - Please Print

Mr. _____ / _____ / _____ / _____
First Name Last Name Soc. Ins. No. Birthday: day/mo/yr

Mrs. _____ / _____ / _____ / _____
First Name Last Name Soc. Ins. No. Birthday: day/mo/yr

Address: _____ Telephone: (____) _____ - _____
Street, including apartment / unit number

_____ Amount Enclosed: \$ _____
City or Town Province \$12.00 per person

_____ Postal Code