



Social Services Department:
607 East 26th Street, Erie, PA 16504-2887, Phone: (814) 459-0621
4855 West Ridge Road, Erie, PA 16506-1213, Phone: (814) 836-5301

APPLICATION FOR ADMISSION

- I am interested in Saint Mary's East
I am interested in Saint Mary's at Asbury Ridge

Name Birthdate Age Sex

Address Phone

Social Security No. Medicare No.

Spouse's Name Living Deceased

Who Referred You

Current Physician Phone

Physician Address

Hospital Preference

Attorney Phone

Attorney Address

Holder of Durable Power of Attorney Phone

Address

Do You Have a Living Will? Yes No

Copies Delivered to Saint Mary's Home of Erie? Yes No

In case of an emergency, notify:

Table with 3 columns: Name, Relationship, Address. Rows 1-3 with sub-headers: Home Phone, Work Phone, Email.

Are you a veteran of the armed services? Yes No

Was your spouse a veteran of the armed services? Yes No

If Yes: Branch
Serial Number

If Yes: Branch
Serial Number

Life Insurance:

Company _____ Policy Number _____
Face Value _____ Cash Surrender _____

Company _____ Policy Number _____
Face Value _____ Cash Surrender _____

Health Insurance & Long Term Care Nursing Home Insurance (If applicable):

Medicare or Managed Care Plan (SecurityBlue, Aetna, United Healthcare, etc.)

_____ Agreement Number _____ Group Number _____

Other _____ Agreement Number _____ Group Number _____

Do you have an irrevocable burial account? ___ Yes ___ No

Funeral Home Preference _____

Monthly Income:

Social Security _____ Other _____

Pension _____

VA Pension _____ *** _____

(Total Monthly Income)

Checking Accounts:

(Bank/Institution)	Joint With	Balance
_____	_____	_____

Savings Accounts/Certificates of Deposit:

_____	_____	_____
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Real Estate:

Do you own your own home? ___ Yes ___ No Mortgage Balance _____

Joint With _____ Market Value _____

Other Real Estate: _____ Joint With _____ Market Value _____

Stocks & Bonds:

Company _____ # of Shares _____ Value _____

Company _____ # of Shares _____ Value _____

Signature of Applicant _____ Relationship _____ Date _____

Email _____