burnaby meals on wheels

Phone: 604-299-5754 Address: 2055 Rosser Avenue, Burnaby, BC, V5C 0H1
Fax: 604-299-3755 Website: www.burnabymeals.ca

CLIENT REGISTRATION FORM

Client Information

First Name: _____ Last Name: _____

Address: _____Apt._____ Burnaby, BC Postal Code_____

Buzzer#: _____ Phone: _____ Birth Date(M/D/Y):_____

Delivery Instructions:_____

Emergency Contact Information (required)

First Name: _____ Last Name: _____

Address: _____Apt._____City:_____Prov._____Postal Code_____

Daytime Phone:_____ Relationship:_____

Email Address:_____

Meal Delivery Schedule

Please indicate number of meals required beside your choice(s) for each day.

Start Date: _____(office use) ***(Note: Breakfast is Frozen)***

Monday		Wednesday		Friday	
Chinese:	_____ x $7.00	Chinese:	_____ x $7.00	Chinese:	_____ x $7.00
Western Hot:	_____ x $7.00	Western Hot:	_____ x $7.00	Western Hot:	_____ x $7.00
Vegetarian:	_____ x $7.00	Vegetarian:	_____ x $7.00	Vegetarian:	_____ x $7.00
Frozen:	_____ x $6.50	Frozen:	_____ x $6.50	Frozen:	_____ x $6.50
Bag Lunch:	_____ x $4.00	Bag Lunch:	_____ x $4.00	Bag Lunch:	_____ x $4.00
Breakfast:	_____ x $6.50	Breakfast:	_____ x $6.50	Breakfast:	_____ x $6.50
Juice:	_____ x $0.50	Juice:	_____ x $0.50	Juice:	_____ x $0.50
Total: _____		**Total:** _____		**Total:** _____	

Total two week advance payment $_____(non-refundable) Please provide cheque or call our office to pay by Credit Card. We will continue to deliver meals after the 2 week advance payment unless notified.

Are you interested in our **Let's Do Lunch Program**? This program is a chance to have a visit from a friendly volunteer who will sit and have lunch with you once a month. Yes ☐ No ☐

Why are you starting this service? _____

How did you hear about Burnaby Meals on Wheels?_____

Fax or Mail completed form to: Burnaby Meals on Wheels
2055 Rosser Avenue, Burnaby, BC V5C 0H1 Fax: 604-299-3755