

RESIDENT CAREGIVER DESIGNATION

During Covid-19 Restrictions

Date: _____

During COVID-19 restrictions, residents at St. Andrew's Residence are able to designate up to Two Caregivers, (Caregiver 1 and Caregiver 2)

I _____ (Print full name),

Appoint: _____ to be my Caregiver 1 during COVID-19 restrictions.

And

Appoint: _____ to be my Caregiver 2 during COVID-19 restrictions.

RESIDENT SIGNATURE: _____

Date: _____

Caregiver 1 Contact Information (email/phone)

Caregiver 2 Contact Information (email/phone)
