Friends House Retirement Community's Circle of Friends Future Residents Program

The Friends House Retirement Community's Circle of Friends Future Residents Program is an exclusive opportunity designed for individuals who are considering making Friends House their future home.

Program Overview

The Circle of Friends Future Residents Program is designed to offer you numerous benefits, ensuring a smooth and comfortable transition to your new life at Friends House. The program includes the following:

Priority Placement*: Your \$500 deposit secures your place in our Circle of Friends Future Resident Program, granting you priority consideration when the residence of your choice becomes available.

Advanced Notifications: Stay informed with exclusive updates on available apartments and move-in opportunities before they are released to the public.

VIP Events: Enjoy access to special events exclusively curated for Circle of Friends members, providing you with a preview of the lifestyle awaiting you at Friends House.

Extended Membership: Your membership in the Circle of Friends is valid until you move in, allowing you plenty time to prepare for your move.

To become a member of the Circle of Friends, kindly complete the enclosed form and include a \$500 deposit. Make checks payable to Friends House Retirement Community. Your membership will be secured, and you'll be on your way to enjoying the numerous benefits our program offers.

We recognize the importance of selecting the ideal retirement community, and we are committed to ensuring a seamless experience for you. The Circle of Friends Future Resident Program is our expression of dedication to your well-being and contentment.

If you have any questions or require further information, please do not hesitate to contact Marie Kiser at 240.919.2383.

We, at Friends House, look forward to welcoming you into our esteemed Circle of Friends.



17340 Quaker Lane | Sandy Spring, MD 20860



Friends House Retirement Community's Circle of Friends Future Resident Application

Depositor's Information:

| Resident Name(s): | |
|---------------------------|------|
| Date of Birth: | |
| Address: | |
| City: | |
| State: | |
| Zip: | |
| Phone: | |
| Email: | |
| Apartment Preferences: #1 | |
| #2 | |
| #3 | |
| | |
| Depositor's Signature: | |
| Depositor Date: | |
| | |
| Received By: | |

