

**Please fill out all highlighted fields in the document.**

- ❖ If you choose to sign and date all fields electronically, please note that this will constitute as your legal signature.
  - Once you have finished completing the document, and have signed it electronically, please save the document to your computer and attach in an email to:  
[info@willowheart.org](mailto:info@willowheart.org)
  
- ❖ If you would rather print off the documents and sign and date manually, please feel free to do so.
  - If you have printed off the document and signed and dated it manually, please either mail or drop off the application to:

**Willow Heart Respite and Care Center, Inc.**

**1000 W. Main Street**

**Little Chute, WI 54140-1549**

Or fax the document to:

**(920) 273-6116**

If you have any questions, feel free to call the office at: **(920) 687- 6454**