Glenmeadow
WAIT LIST AGREEMENT

1. This Agreement is made and entered into this ———— day of ————————————, 201——— by and between Glenmeadow, Inc., a not-for-profit Massachusetts corporation and ———————————————————————————— ("you" or the "Applicant"). If two people enter into this Agreement, each or the survivor is deemed the Applicant.

2. Under the terms of this Agreement you shall be put on a Wait List for the following type of apartment(s) at Glenmeadow: ———————————————————————————————— .

3. As a condition to this Agreement, you shall pay a Wait List Deposit of Three Thousand Dollars ($3,000), made payable to Glenmeadow. The deposit shall be placed in escrow and will accrue interest at the bank's current money market rate.

4. Glenmeadow will place your name on the Wait List for the type of apartment you specified, in the order in which the Wait List Deposit is received. The Entrance Fee you pay upon acceptance for residency will be the Entrance Fee in effect on the date of occupancy.

5. When the type of apartment listed above in paragraph 2 becomes available, Glenmeadow shall make a good faith effort to notify you of the apartment's availability. You will have seven (7) days from that date of contact to reserve the apartment by executing a Reservation Agreement and Confidential Data Application.

   The monthly service fee applicable to the apartment will also be specified and subject to adjustment as provided in the Residency Agreement.

6. If you do not reserve the apartment within seven (7) days from the date of contact, then Glenmeadow will consider this as a refusal by you.

7. You may terminate this Agreement at any time by notifying Glenmeadow in writing. Within fourteen (14) days from receipt of your notice of termination, Glenmeadow will refund your Wait List Deposit, plus accrued interest, less a processing fee of Five Hundred Dollars ($500.00).

8. If your death or other catastrophic event (as decided by the President) occurs while you are on the Wait List, this Agreement will automatically terminate and a refund shall be paid to you or your estate of the full Deposit plus accrued interest. If there are joint Applicants to this Agreement and one Applicant dies, this Agreement shall continue with the surviving Applicant. If the surviving Applicant then desires an apartment type other than the type specified in paragraph 2, this Agreement may be amended.

9. This Agreement pertains only to your position on the Wait List and the order in which the apartments will be offered for occupancy. You understand that Glenmeadow may refuse to accept your Residency Agreement if, in the discretion of the President, at the time an apartment becomes available for occupancy:

   (i) You no longer meet the criteria for residency (as defined in the Residency Agreement);

   (ii) You have misrepresented information on the Confidential Data Application; or

   (iii) You have transferred property or funds such that your ability to meet the financial obligations to Glenmeadow is impaired.

10. All written correspondence to Glenmeadow should be addressed to: President, Glenmeadow, 24 Tabor Crossing, Longmeadow, MA 01106.

    All written correspondence from Glenmeadow to you will be sent to your address written below, unless you otherwise instruct the President in writing.

11. This Agreement has been signed by Glenmeadow's President or by the Chairperson of Glenmeadow, Inc. acting in that representative capacity. No persons affiliated with Glenmeadow, Inc. shall have any personal obligation to the Applicant under this Agreement.

12. Prior to your execution of this Agreement, Glenmeadow provided you with, and you hereby acknowledge receipt of, a Disclosure Statement in conformance with the laws of the Commonwealth of Massachusetts. It is in your best interest to review this material prior to signing this Agreement.

GLENMEADOW:

By: _____

_____   _____
Date   Title

APPLICANTS):

_____   _____
Witness   Signature of Applicant

                                          _____
                                          Print Name

                                          _____
                                          Social Security Number

                                          _____
                                          Street Address

                                          _____
                                          City   State/Zip Code

                                          _____
                                          Telephone

_____   _____
Witness   Signature of 2nd Applicant (if applicable)

                                          _____
                                          Print Name

                                          _____
                                          Social Security Number