


The Pavilion
AT BROOKMEADE

August 1, 2019

Re: Services

Dear Brookmeade Neighbors and Friends,

We are pleased to inform you we are making quick progress in the construction of the building which will house our Adult Day Health Care Program and our Event Center. The Adult Day Health Care Program will offer medically-supervised care and companionship for individuals with physical or mental impairments who need daytime assistance away from home. The Program also offers relief to family members and caregivers, allowing them to go to work, handle personal business, or just relax while knowing their loved one is well cared for and safe.

The Event Center, to be known as the Pavilion, will house a café and community meeting area. The space will be available for community events that can seat up to 250 individuals and can be sub-divided into three rooms for smaller groups. The Pavilion will offer a variety of services such as a hair salon, fitness studio and wellness programs.

As valued members of the community, we are offering you the opportunity to participate in the experience!

Are you an instructor, an artist or have a unique talent? Do you offer Meditation, Yoga, Zumba, Defensive Driving Classes, CPR Classes, Cosmetology Services, Massage Therapy, Aromatherapy, or another exciting experience?

If you want to be a part of this exciting time by supplementing our programs with your services, complete the form below and return it to us at the address noted. Perhaps you prefer to share your interest in the program, the facility or its offerings instead? Your response and/or feedback is welcomed and greatly appreciated. Simply complete the form and mail it to the attention of Brian Zeidan, Program Director at the address below.

You may also email Info@brookmeadecommunity.org should you have any questions. We look forward to hearing from you.

Regards,



Karen Zobel
CEO/Administrator



Brian Zeidan
Program Director



Lisa Stencel
Director of Finance

THE COMMUNITY AT
BROOKMEADE



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CommunityAtBrookmeade.org

___ Yes, I'd like to be a part of the new program/facility. I'll share the following to be considered:

- I can offer the following program or service ...
- I can offer this service at this frequency (daily, weekly, monthly, or specify)...
- The duration of this service is (hourly, daily or fee for service)...
- I propose to provide this service at a rate of...
- I do/do not have liability insurance and workers compensation insurance...
- I have specific space/equipment or other needs to perform this service.....
- My experience in providing this is as follows:
- I have the following references.....

___ I am excited to hear about your programs. I would like to see the following offerings:

I can be reached at the following address once you are ready to open the facility:

Phone #: _____

___ I have a loved one who could benefit from the Adult Day Care Program. Please contact me as you prepare to welcome your first participants. I can be reached at the following address:

Phone #: _____

