



Name: _____

ADULT DAY HEALTH CARE

Hours Of Operation

Monday through Friday

7:00 a.m. – 6:00 p.m.

I certify that I have received a copy of Redwood's posted hours of operation.

Signature of Client or Parent/Guardian

Date

71 Orphanage Road, Ft. Mitchell, Kentucky 41017
(859) 331-0880 fax (859) 331-6177



A United Way Agency