

# Town of Union Vale/ Dutchess County Office of the Aging Meals on Wheels Referral Form



Submit Forms:

Town Clerk's Office

249 Duncan Road  
Lagrangeville, NY 12540

Phone: (845) 724-500 Fax: (845) 724-3757

E-Mail [TownClerk@UnionValeNY.US](mailto:TownClerk@UnionValeNY.US)

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Name of Senior: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

What is your relationship to the senior?

Neighbor

Relative

Other \_\_\_\_\_

How may we contact you? \_\_\_\_\_

Comments or anything else we should know? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_