

HOTEL ROOM CHECK LIST FORM

Names of Student(s) in the Room:				
School(s):				
Chaperone:			Hotel Room #:	
NUMBER OF	CHECK IN CONDITION		CHECK OUT CONDITION	
	ACCEPTABLE	DAMAGED	ACCEPTABLE	DAMAGED
BEDS				
BATHROOMS				
CHAIRS				
PILLOWS				
BEDSPREADS				
TOWELS				
SCREENS				
MIRRORS				
LIGHTS				
TVS				
BUREAU/DRESSER				
WINDOWS				
OTHER				



Delegation: ____

