**Hotel Room Check-In Form PDF**

**Hotel Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Check-In Date: \_\_\_\_\_\_\_\_\_\_
Check-Out Date: \_\_\_\_\_\_\_\_\_\_**

### **Guest Information**

* **Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Date of Birth: \_\_\_\_\_\_\_\_\_\_**
* **ID Type: ( ☐ Passport ☐ Driver’s License ☐ National ID )**
* **ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### **Stay Details**

| **Room Type** | **Nights Stay** | **Number of Guests** | **Rate per Night** |
| --- | --- | --- | --- |
|  |  |  |  |

### **Payment Method**

| **Payment Type** | **Amount Paid** | **Balance Due** | **Confirmation No.** |
| --- | --- | --- | --- |
|  |  |  |  |

### **Additional Requests**

* **Do you require room service? ( ☐ Yes ☐ No )**
* **Do you require a wake-up call? ( ☐ Yes ☐ No )**
* **Special Instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Guest Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_**