

Copy of this form to be submitted to Housekeeping

***PLEASANT MANOR RETIREMENT VILLAGE
GUEST ROOM REGISTER***

<input type="checkbox"/>	CV GUEST ROOM # 1	(Queen)
<input type="checkbox"/>	CV GUEST ROOM # 2	(2 Twins)
<input type="checkbox"/>	CV GUEST ROOM # 3	(Queen)
<input type="checkbox"/>	CV GUEST ROOM # 4	(2 Twins)
<input type="checkbox"/>	HP GUEST ROOM	(2 Twins)

Date:

Name:

Address:

Telephone #:

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Arrival Date:

Departure Date:

Number of Adults: _____ Number of Children: _____

Paid: Cheque \$_____ Cash \$_____

Staff Signature: _____

***Pleasant Manor Retirement Village
Guest Room Policies***

1. Cost, as stipulated on Register, payable to Pleasant Manor.
2. Cost includes accommodations for one night, maximum of two adults per room.
3. Additional meals may be purchased with notification to the office prior to 9:30 am the day of. Please Call (905) 468-1111 to make those arrangements.
Dining Room located in the Arborview Building by Administration.
4. Children MUST be supervised at all times.
5. Pleasant Manor Retirement Village or its employees will not be responsible for loss or damage of personal items.
6. Pleasant Manor is a smoke free and pet free facility.

**PLEASANT MANOR RETIREMENT VILLAGE
GUEST ROOM FEE SCHEDULE:**

Guest Room \$50.00/per night \$1,200.00/per 28 day period

***Check in is at 2:00pm**

***Check out is at 11:00am**

Lunch (12:00pm) \$9.00

Supper (5:00pm) \$7.00

I have read and understand the policies and fee schedule as written above.

Signature: _____ Date: _____

***This allows Housekeeping enough time to clean guest rooms.**