

Resident Away Notice

Resident name(s): _____

Patio Home #: _____ Total # of residents away: _____

Date Leaving: _____ Date Returning*: _____

*Please notify reception desk of any date changes.

Total # of days away: _____

Address(es) of where you are travelling to/from:

Do you want Housekeeping? YES NO

Do you want your Sherwood Oaks monthly statement mailed you?
 Yes NO

Contact Information while you are away:

Phone number where you can be reached in an emergency:

Other pertinent information we need to know:

Resident Signature*: _____ Date: _____

*if this is taken over the phone, print resident's name and sign with your initials.

Entered into computer - Date: _____

Copy to Housekeeping

Copy to Finance

Original in top file drawer

Receptionist initials: _____