



JCU HALLS OF RESIDENCE

REQUEST FOR OVERNIGHT GUEST

Residents Name: _____ **Room:** _____

Guest Name: _____ **Guest Mobile:** _____

Relationship [brother, sister, parent, friend, etc.]: _____

Arrival Date: _____ **Time:** _____

Departure Date: _____ **Time:** _____

Mattress/Trundle Bed Required [subject to availability]: Yes / No **Total Nights Stay:** _____

Comments: _____

- No accommodation charges apply for 1 – 2 nights stay, \$10 per night accommodation charge applies for 3 – 5 nights, and if a mattress/trundle bed is required, a charge of \$5 per night applies for mattress hire.
- You must ALWAYS sign a guest in to EVERY meal at a cost of \$10.00 per meal for breakfast or lunch, and \$13 for dinner.
- A stay of more than two nights must be authorised by the Block/Floor RA before permission is sought from the Senior Residential Assistant.
- A stay of more than five nights is considered a casual guest. Application must be made accordingly, and is subject to availability. Casual accommodation rates apply.
- If approval is not received for overnight guest(s), the resident will be charged \$50.00 per guest per night which does not include meals.
- Residents at **George Roberts Hall** must have signed permission from other residents in their unit if more than two nights.

Room/Unit: _____
Signature Signature Signature

- ✓ **I have read and agree to the conditions outlined above.**
- ✓ **I accept responsibility for my guest's behaviour while at the Hall.**
- ✓ **I will accompany my guest to meals and social activities.**
- ✓ **I agree to ensure my guest is signed in before every meal and pay accordingly.**

Signature: _____ **Date:** _____

Duration of Stay	Approval	Signature	Date
1 - 2 Nights No accommodation fee, meals and mattress hire extra.	Residential Assistant		
3 - 5 Nights \$10 per night (after second night), meals and mattress hire extra.	Senior Residential Assistant	(RA must also sign above)	

Office Use Only		
Mattress Required: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Mattress Number:	Notified:
Date Taken:	Date Due:	Applicant (if unsuccessful) <input type="checkbox"/>
		Residential Assistants <input type="checkbox"/>
		Housekeeping <input type="checkbox"/>