

Winter Shelter Intake Checklist

Guest Information

Full Name

Date of Birth

Contact Number

Emergency Contact

Allergies / Medical Needs

Intake Checklist

- ☐ ID Verified
- ☐ COVID-19 Screening Completed
- ☐ Rules and Expectations Reviewed
- ☐ Belongings Checked and Stored
- ☐ Meal Preferences Noted
- ☐ Assigned Sleeping Area
- ☐ Health Concerns Noted
- ☐ Consent Forms Signed

Staff Notes