

## CHECK-IN & CHECK-OUT / FACILITY INSPECTION REPORT

LODGE/SITE LOCATION: \_\_\_\_\_ UNIT/GROUP NAME: \_\_\_\_\_  
 Date In: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time In: \_\_\_\_ :

**CHECK-IN / CHECK-OUT**

DESCRIPTION (sites and lodges)

- Visual damage to site, building or grounds (explain under remarks)**
- Replace any picnic tables moved**
- Tables and benches stacked and all windows and doors secured**
- One night's firewood is available at check-in or check-out**  
(It is not a Foundation Policy to supply firewood to buildings or sites. Please leave wood for the next group)
- Bunks and mattresses properly stored (and not moved to other buildings or sites)**
- Tools available:**  Broom  Shovel  Rake  Bucket  Mop  Other \_\_\_\_\_
- Refrigerator and stove(s) empty and cleaned out. Stove turned off.**
- Inspect local water source(s) (frost free) for water service, litter, drainage**  
[ DO NOT DUMP GRAY WATER (Wash Water) AT WATER SOURCE (Frost Free) ]
- Always pick up litter in site, entrance, latrine, trails and surrounding woods**
- Bag all trash to take home or to the dumpster in main parking lot**
- Fire extinguisher returned or available and pressure gauge inspected**
- Smoke alarm in working condition, with battery, and any heaters turned off / down**
- Remove ashes from fireplace or wood burner to outside firepit & extinguish**  
(BUILD FIRES ONLY IN ESTABLISHED FIRE RING LOCATIONS. FIRES SHOULD NOT BE LEFT UNATTENDED)
- Extinguish outside fires completely (cold to touch) - Check fire pit for unburned trash**
- Lights (inside & out) and fans off. Any light bulbs need to be replaced?**  YES  NO
- Sweep and or mop out building and outside entrance areas or porches**
- Return any borrowed equipment or leftover materials**

Were any health and safety or hazardous issues handled to your expectation or satisfaction?  YES  NO  
 Group is permitted to have 1 vehicle in camp?  YES  NO ...in campsite?  YES  NO  
 Group is permitted to have an equipment trailer on site, in camp?  YES  NO  
 Did your group participate in a camp service project?  YES  NO  
 Were you informed of Trading Post, coming events, firewood sales or our website during your stay?  YES  NO  
 Are there any current Camp Tuscazoar Foundation members in the group?  YES  NO  ?

Check-in remarks: \_\_\_\_\_

Check-out remarks/suggestions : \_\_\_\_\_

Check box if more information is listed on the back of this sheet.

> Please try to be ready at your given estimated departure time. If you leave your site/lodge without an inspection by CTF staff and yourself, *your group will be held responsible for any damages found upon our check out inspection, without dispute or argument.*<

UNIT/ GROUP NAME: \_\_\_\_\_ used this site before you. (if available)

<p><b><u>Check-In Initials:</u></b>                  Unit Leader: _____ CTF Rep. _____                  Est. check-out time (day) _____ : (_____) _____                  Number of people in camp from group: _____                  Amount of rental fee paid \$ _____</p>	<p><b><u>Check-Out Initials:</u></b>                  Unit Adult Leader: _____                  Check out date: _____ / _____ / _____                  Actual Check out time: _____ : _____                  CTF Rep. _____</p>
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