



Stretton Park Hostel

Valuables List

Surname:

Given name

Admission date:

Room no.

Please tick if the resident has any of the following on admission.

Transistor Radio Type and Description: _____

Portable Television Type and Description: _____

Cassette Recorder Type and Description: _____

Video Recorder/DVD Type and Description: _____

Telephone Type and Description: _____

Other (eg. Cassettes, games): _____

Furniture (Describe): _____

Special or Personal Items (eg. Photo frames, vases): _____

Jewellery: Wristwatch Description: _____

Rings Description: _____

All Other (describe colour of metal/stones etc.): _____

Money \$ _____

Wallet/Purse Description: _____

Handbag Description: _____

Suitcase Description: _____

Other Description: _____

Walking Frame Describe Type: _____

Quad Frame Other physical aids: _____

Walking Stick Wheelchair (Describe): _____

Resident/ Representative Signature _____

Date _____

Staff Member _____

Date _____