



**NORTH CAROLINA A & T STATE UNIVERSITY  
HOUSING AND RESIDENCE LIFE  
CONFERENCE HOUSING KEY RECEIPT & CHECKLIST**

\_\_\_\_\_  
(Group/Organization Name)

\_\_\_\_\_  
(Conference Guest Name)

**Emergency Contact:** \_\_\_\_\_  
(AGE 17 & UNDER MUST PROVIDE EMERGENCY CONTACT)

**Building:** \_\_\_\_\_ **Room Number:** \_\_\_\_\_

**Key Number:** \_\_\_\_\_ **Key Number:** \_\_\_\_\_ **Key Number:** \_\_\_\_\_

I \_\_\_\_\_ have received the key(s) listed above.  
(PRINT)

I understand by signing below I accept full responsibility for the care and return of all key(s) listed above. I further understand that I will be responsible for the cost to replace all key(s) issued if not returned on the date and time indicated above or in a satisfactory condition. **The key replacement cost is \$170.00.**

**Issue Date:** \_\_\_\_\_

**Received By:** \_\_\_\_\_

**Issued By:** \_\_\_\_\_  
(SIGNATURE)

**Return Date:** \_\_\_\_\_

**Returned By:** \_\_\_\_\_

**Received By:** \_\_\_\_\_  
(SIGNATURE)

**Room Checklist**

Please confirm that the following items are present in your room and are in a satisfactory working condition: (Linens and toiletries are not provided)

- Bed
- Desk
- Chair
- Air Conditioner(s)
- Microfridge (one [1] per double room; two [2] per suite)
- Toilet(s)
- Shower(s)
- Shower Curtain(s)
- Living Room Furniture (sofa/love seat/coffee table - Available in Single/Private Rooms Only)
- Closet

**Concerns:**

\_\_\_\_\_