

PACKING CHECK LIST



Name: _____

Number of days you'll be on holidays: _____

What kind of holiday you are going?

Summer Holiday

Winter Holiday

My personal things:



Tooth Brush



Tooth paste



Hair Brush



Underpants

Day _____ List

Activities planned for today: _____



T-shirt/dress



Pants/skirt



Shoes/slippers



Hats



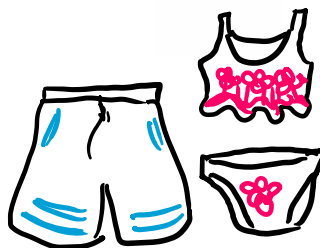
Socks



Water bottle

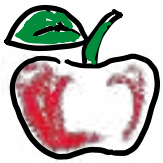


Jacket/coat



Bathers

EXTRA LIST



Fruit snack



Medicine



Biscuits/Crackers



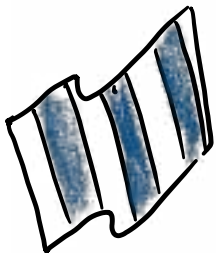
Umbrella/
Raincoat



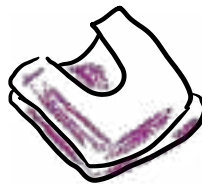
Nappies



Milk Bottle



Towels



Change of clothes