

# TRAVEL PLANNING CHECKLIST

DATE: \_\_\_\_\_  
BUDGET: \_\_\_\_\_  
DESTINATION: \_\_\_\_\_

## THE PESKY DETAILS

- |  |   |
|--|---|
| <input type="checkbox"/> PASSPORT/VISA NEEDED? | <input type="checkbox"/> MEDICATIONS?     |
| <input type="checkbox"/> PASSPORT CURRENT?     | <input type="checkbox"/> CELL PHONE PLAN? |
| <input type="checkbox"/> VACCINATIONS NEEDED?  | <input type="checkbox"/> INFO TO OTHERS?  |
| <input type="checkbox"/> BANK ALERTED?         | <input type="checkbox"/>                  |
| <input type="checkbox"/> TRAVEL INSURANCE?     | <input type="checkbox"/>                  |

## BOOKINGS

- |                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/> AIRFARE    | <input type="checkbox"/> TOUR RESERVATIONS |
| <input type="checkbox"/> CAR RENTAL | <input type="checkbox"/>                   |
| <input type="checkbox"/> LODGING    | <input type="checkbox"/>                   |
| <input type="checkbox"/> RESTAURANT | <input type="checkbox"/>                   |

## PACKING LIST

- |  |  |
|--|--|
| <input type="checkbox"/> TOOTHBRUSH            | <input type="checkbox"/> MEDICATIONS                 |
| <input type="checkbox"/> TOOTHPASTE            | <input type="checkbox"/> CLOTHES                     |
| <input type="checkbox"/> DENTAL FLOSS          | <input type="checkbox"/> SHOES                       |
| <input type="checkbox"/> FACE WASH             | <input type="checkbox"/> UNDERWEAR                   |
| <input type="checkbox"/> MOISTURIZER           | <input type="checkbox"/> PJS                         |
| <input type="checkbox"/> SHAMPOO & CONDITIONER | <input type="checkbox"/> SOCKS                       |
| <input type="checkbox"/> BODY WASH             | <input type="checkbox"/> PASSPORT & IDS              |
| <input type="checkbox"/> DEODORANT             | <input type="checkbox"/> CELLPHONE/LAPTOP/IPAD       |
| <input type="checkbox"/> LOTION/PERFUME        | <input type="checkbox"/> CHARGERS                    |
| <input type="checkbox"/> HAIRBRUSH             | <input type="checkbox"/> WALLET                      |
| <input type="checkbox"/> SUNSCREEN             | <input type="checkbox"/> EYE MASK/EAR PLUGS          |
| <input type="checkbox"/> MAKEUP                | <input type="checkbox"/> TISSUES/HAND SANITIZER/MASK |
| <input type="checkbox"/> CONTACTS & GLASSES    | <input type="checkbox"/> PASHMINA                    |