Guest Bedroom List

House Details

- **Address:** [House Address]
- **Event Associated (if any):** [Event Name]

Guest Information

S. No.	Guest Name	Contact Information	Room Assigned	Stay Duration	Special Requirements
1	[Name]	[Phone/Email]	[Room Number/Name]	[Dates]	[Allergies, Preferences, etc.]
2	[Name]	[Phone/Email]	[Room Number/Name]	[Dates]	[Allergies, Preferences, etc.]

Summary

- **Total Guests:** [Number]
- **Rooms Occupied:** [Number]