



bloom

PACKING LIST & DAILY OUTFIT ORGANIZER

DATES: _____ TO: _____ DESTINATION: _____

TOTAL DAYS AWAY: _____

EVERYDAY ITEMS TO PACK:

TOILETRIES

Packed

Shampoo / Conditioner ☐
Body / Face Wash ☐
Lotion / SPF ☐
Makeup ☐
Medicine / Vitamins ☐
Toothbrush / Toothpaste ☐
Razor / Shaving Cream ☐
Hair Products / Tools ☐
Glasses / Contacts ☐

ACCESSORIES

Packed

Undergarments x _____ ☐
Belts ☐
Purse / Clutch ☐
Scarves ☐
Jewelry ☐
Bathing Suit(s) ☐
Hat(s) ☐

OTHER

Packed

Books ☐
Electronics ☐
Chargers ☐
ID / Passport ☐
Tickets / Travel Documents ☐
Wallet / Money ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐
Bottom: _____ ☐
Shoes/Socks: _____ ☐
Jewelry/Accessories: _____ ☐
Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐
Bottom: _____ ☐
Shoes/Socks: _____ ☐
Jewelry/Accessories: _____ ☐
Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐
Bottom: _____ ☐
Shoes/Socks: _____ ☐
Jewelry/Accessories: _____ ☐
Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐
Bottom: _____ ☐
Shoes/Socks: _____ ☐
Jewelry/Accessories: _____ ☐
Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

DAY _____

DAYTIME ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐

WEATHER _____

EVENING ACTIVITY: _____

Top: _____ ☐

Bottom: _____ ☐

Shoes/Socks: _____ ☐

Jewelry/Accessories: _____ ☐

Other: _____ ☐