

Paradise Police Department 5595 Black Olive Drive Paradise, CA 95969 (530)872-6247 (530)872-4950 Fax

## **EVENT REQUEST**

Today's Date:

\_(At least 30 days in advance)

The Paradise Police Department will make every effort to accomodate requests depending on conflicting staffing, emergencies, or other engagements.

Requests should be submitted at least 30 days in advance along with a detailed description of the event.

For speaking engagements, presentations, training, or demonstrations, a list of topics is appreciated.

Police Services and/or Volunteers used for approved private events may be charged on a per person, hourly basis.

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|------------------------|------------|--------|----------|------|-------|-----|
|                        |            |        |          |      |       |     |
| Organization:          |            |        |          |      |       |     |
| Address                |            |        |          |      |       |     |
| City/State/Zip         |            |        |          |      |       |     |
| Phone                  |            |        |          |      |       |     |
| Fax/E-mail             |            |        |          |      |       |     |
| Contact Name           |            |        |          |      |       |     |
|                        |            |        | EVENT:   |      |       |     |
|                        |            |        |          |      |       |     |
| Event Name:            |            |        |          |      |       |     |
| Date:                  |            |        |          |      |       |     |
| Time:                  |            |        |          |      |       |     |
| Location:              |            |        |          |      |       |     |
| Personnel Requested:   |            | Police |          | VIPS | OTHER |     |
| *Non-profit:           | YES        |        | NO       |      |       |     |
| Audio/Visual Equipment | Available: |        | YES      |      | NO    | N/A |

| DESCRIPTION: Describe type of event requested | ${\sf d}$ (speaking engagement, demonstration, training, tour, etc.) |
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| ADDITIONAL COMMENTS |
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| INTERNAL USE ONLY                  |              |         |                |  |  |  |
|------------------------------------|--------------|---------|----------------|--|--|--|
| APPROVED:                          | YES          | NO      |                |  |  |  |
| PERSONNEL ASSIGNED                 | :            |         |                |  |  |  |
|                                    |              |         |                |  |  |  |
| APPROVED BY:                       |              |         |                |  |  |  |
|                                    |              |         |                |  |  |  |
| Routed/Calendar to Administration: |              |         |                |  |  |  |
|                                    |              | Date    |                |  |  |  |
| Calendar: Sgts.                    | Assigned Err | ipioyee | Administration |  |  |  |