

Chase County Event Planning Request Form

Date Request Received _____

Date of Event _____ Time of Event _____ AM or PM

Date of Event _____

Contact Name _____

Phone Numbers Home _____ Office _____

Cell _____

Name of Event _____

Type of Event _____

If fundraiser, what is the contribution per person _____

Sponsor(s) _____

Location _____

Roadway(s) and route to be used if event is a walk, race, or ride that will require any assistance from Law Enforcement.

****NOTE**** Any and traffic assistance on state or local roads must be conducted by and/or approved by law enforcement with jurisdiction of those roads.

Purpose of Event _____

Estimated Attendance/Participants _____

Law Enforcement _____ Fire Dept _____ EMS _____

Request attend from _____ to _____

Comments: _____

DATE _____

_____ First Response

_____ Regret: by phone [] by letter []

_____ Tentative yes

_____ Canceled: by whom: _____

Confirmed: by whom _____

Staffed by _____