PUBLIC EVENT REQUEST FORM

Please submit this request form a minimum of *two weeks* prior to the requested program date.

After your submittal is reviewed, you will be notified by email if HFD will be able to assist you with your request.

Disclaimer: The submission of this form does not guarantee approval of your request.

Date of Request:				
Group/Organization:				
Contact Person:				
Contact Phone Number:	E-Mail:			
Address where program is to be presented				
Requested Program Date:		# of Children:		
Requested Program Times / Length:				
Type of Program Requested:				
Station Visit/Tour Apparatus Display	y Parade	Prevention/Safety	Education/Booth/Fair	Other
Please describe briefly what assistance you Career Fair, etc. If applicable, please add th		•	•	r display,
This form may be returned through:				
E-mail to fire@hawaiicounty.gov				

Printed and mailed to: Hawaii Fire Department 25 Aupuni St. Suite 2501, Hilo, HI 96720

For questions, please call HFD Administration at 808-932-2900.