



Citrus Heights Police Department  
 6315 Fountain Square Drive, Citrus Heights, CA 95621 (916) 727-5500

## Community Event Request

Please provide **4 weeks' notice** to CHPD prior to events. All fields must be properly filled in. This request will be evaluated for approval based on relevance to law enforcement/education, audience, time required and resources available to CHPD at time of request. Please submit completed form to the Special Operations Sergeant for approval.

City/Community Event Contact Information					
Today's Date:	Contact Name:	Organization Name:			
Mailing Address:			City, State, Zip:		
Telephone Number:	Cell Number:	Fax Number:	Email Address:		
Event Information					
Date Of Event:		Event Name:			
Location Of Event:			Start Time:	End Time:	
Describe in detail the event activities:			Attendance Expectation (# Of People):	Age Group:	
Describe in detail your expectations of our representation. Explain what activities you would like us to perform:					
Requestor's Signature:				Date:	
CHPD APPROVAL (CHPD personnel use only)					
Requested # Of Personnel				Event Set-Up Description: (What Do We Need To Bring)	
<u>Support Services</u> #	<u>Patrol</u> #	<u>Investigations</u> #			
<input type="checkbox"/> Records:        _____	<input type="checkbox"/> Officer:        _____	<input type="checkbox"/> Detective:      _____			
<input type="checkbox"/> Dispatchers:    _____	<input type="checkbox"/> Motors:        _____	<input type="checkbox"/> CSI:             _____			
<input type="checkbox"/> Volunteers:     _____	<input type="checkbox"/> K-9:            _____	<input type="checkbox"/> Fingerprinting: _____			
<input type="checkbox"/> Speaker:        _____	<input type="checkbox"/> Speaker:        _____	<input type="checkbox"/> Speaker:        _____			
<input type="checkbox"/> Cadets:         _____	<input type="checkbox"/> Youth Services: _____	<input type="checkbox"/> Youth Services: _____			
Sergeant Signature:		ID#:	Date:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Lieutenant Signature:		ID#:	Date:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Event Coordinator:		<input type="checkbox"/> Notified	<input type="checkbox"/> All Division Commanders Notified <input type="checkbox"/> Internal Dept. Messaging <input type="checkbox"/> Add To PD Event Calendar		
Assigned Supervisor:		<input type="checkbox"/> Notified			