

# REQUEST FOR COLOR GUARD PARTICIPATION

TO:

MCRD Parris Island Color Guard

**ALL DATA WILL BE HANDLED ON A "FOR OFFICIAL USE ONLY" BASIS.**

**PURPOSE:** This form is used to request the Band's participation in military events. The information is required for coordination with the units involved and to evaluate the event for appropriateness and compliance with DoD, Marine Corps, and local command policies. Please complete all sections.

## SECTION I – EVENT DATA

1. NATURE OF EVENT FOR WHICH BAND IS REQUESTED:

2. DATE OF EVENT:

3. TIME OF EVENT:

4. LOCATION OF EVENT:

5. UNIFORM:

6. VIP(S) / DIGNITARIES, GOVERNMENT OFFICIALS:

7. CAN THE EVENT BE RESCHEDULED DUE TO BAND NON-AVAILABILITY?

## SECTION II – SPONSORING ORGANIZATION DATA

8. a. NAME OF SPONSORING COMMAND / ORGANIZATION:

b. COMPLETE MAILING ADDRESS:

c. POINT OF CONTACT (*Rank and Name*):

d. E-MAIL ADDRESS:

e. PRIMARY TELEPHONE (*Include area code*):

f. ALTERNATE TELEPHONE (*Include area code*):

g. 2<sup>nd</sup> POINT OF CONTACT (*Rank and Name*):

h. E-MAIL ADDRESS:

i. PRIMARY TELEPHONE (*Include area code*):

## SECTION III – SPECIAL REQUIREMENTS

\*BAND IS NOT REQUIRED TO PARTICIPATE IN REHEARSALS. ARRANGEMENTS CAN BE MADE IF SCHEDULE PERMITS\*

9. REHEARSAL DATE / TIME:

10. SPECIAL MUSIC REQUESTED (*Use block 12 Remarks section if necessary*):

## SECTION IV - SPONSORING ORGANIZATION DATA

\*UNITS OUTSIDE OF PARENT COMMAND MAY BE RESPONSIBLE FOR FUNDING EXPENSES I.E. TRANSPORTATION, BILLETING, ETC.\*

11. APPROPRIATION / FUNDING DATA (*If applicable*):

12. REMARKS (*Use this area for additional information. Reference by section and block number / letter*):

## SECTION V - CERTIFICATION

13. I am acting on behalf of the sponsoring command / organization and certify that the information provided above is complete and accurate to the best of my knowledge. I understand that a representative from the band will contact me to discuss arrangements and costs involved prior to final commitments, or inform me of their non-availability.

a. SIGNATURE OF SPONSOR'S REPRESENTATIVE:

b. DATE SIGNED:

c. PRINT NAME AND TITLE: