



LANCASTER COUNTY FIRE POLICE TASK FORCE

EVENT REQUEST FORM

Please fill out this form and mail it to the address below

Name of Organization requesting our service's: _____

Name of Contact: _____

Email of Contact: _____

Phone # of Contact: _____

Dates of the events: _____

Fire Police are needed for: _____

Comment Section:

Will your organization provide insurance coverage? Yes ___ or No ___ (Check one)

"For the well-being of our Fire Police, we require that the requesting organization provide insurance covering those Fire Police who assist at your function. Proof of insurance may be required"

Signature of Contact person: _____

Date Signed: ___/___/___

Signature of Task Force President: _____

Date Signed: ___/___/___

Mailing Address
Fire Police Task Force Secretary
Kevin T. Fuentes
121 Wheatland Dr.
Denver, PA 17517