

DEPARTMENT OF THE AIR FORCE JOINT BASE ANACOSTIA-BOLLING 421 BROOKLEYAVE WASHINGTON, D.C. 20032-7711

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| Tracking Number | |
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SPECIAL EVENT ACCESS REQUEST

INTRODUCTION

The JBAB Joint Visitor Control Center (JVCC) is responsible for processing access on to the base for visitors eighteen (18) years of age or older. Children under eighteen (18) require escorts. Photo identification is not required but highly suggested when possible (*i.e. state ID, school ID*). Special Event Access Requests are needed when SIX (6) or more Non-Department of Defense (DoD) card holders require unescorted permission on the base.

INSTRUCTIONS

List guests who are eighteen (18) years of age and older, and do not have base or DOD identification access cards. The number of participants will guide the coordination time required.

300 or more Coordinate with Base AT Officer located at the JBAB Police Department, building 421, Brookley

Ave. Law Enforcement Desk (202) 767-5000 (During business hours).

100 or more Coordinate 14-business days prior with the Special Event Manager located at the Visitor Control Center.

<u>99 or less</u> Coordinate 7-business days prior with the Special Event Manager located at the Visitor Control Center.

E-mail the list to this office prior to your arrival to, 11SFS.Visitor.ControlCenter@us.af.mil titled: Special Event (Your Last Name). Take the request form to event space for site manager conformation, prior to turning in the complete hard copy. Return form to JVCC to receive a control number for event conformation. If event is at a residence on base, "Site Manager Information" is not needed. Guests may be denied due to incomplete information, or due to the pre-screening process.

| SPONSOR INFORMATION | | | | | | | | | | |
|--|------------|---------------------------------------|--------------|-------------------------|------------|--------------|--|--|--|--|
| Name: (Last, First Middle) E-Mail | | | | | Rank/Grade | Request Date | | | | |
| Organization/Title | Main Phone | | | Work Phone | | | | | | |
| Address | , | Work Address | | | | | | | | |
| Branch: DoD USN US Army USAF U | SMC | ■ USCG | Status: Act | ive | Reserve | ■ Retired | | | | |
| EVENT INFORMATION | | | | | | | | | | |
| Location of Event: | | Total Guest | Listed Guest | Listed Guest Event Date | | Event Time | | | | |
| Type for Event: | | Name of Organization: (If Applicable) | | | | | | | | |
| SITE MANAGER INFORMATION | | | | | | | | | | |
| As the Site Manager/Supervisor, I verify that the event is scheduled and approved to be held at the specified location, date and time. I understand that the total number of guests invited will not exceed the maximum number of individuals authorized at this location. Maximum # | | | | | | | | | | |
| Name: (Last, First Middle) | Si | Signature | | | Rank/Grade | Date | | | | |
| SPONSOR ACKNOWLEDGMENT | | | | | | | | | | |
| I certify that the information provided above is correct and accurate. acknowledged the information outlined in this form. | e read and | Signature | | | | | | | | |



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FURTHER INSTRUCTION

Drivers must provide a current driver license when entering the base and may use any gate open during your event. All occupants eighteen (18) years of age and older will provide valid identification when entering the base. All vehicles are subject to inspection when entering, while on, or before leaving the military installation. All vehicles' registration and insurance must be current.

Guests are not permitted in "Restricted" or "Controlled" areas and may only travel from the base entry point to the event.

Weapons are not permitted on the installation. Prohibited drugs and its paraphernalia are not permitted on the installation and individual(s) will be prosecuted under law.

SPECIAL FUNCTION LIST EXAMPLE

EXAMPLE 1

Event: (*Example*: Shaw Family Reunion) **POC:** (*Name of Sponsor*: Last, First)

Contact Number: (Number during event with area code)

| Last Name | First Name | MI | Date of Birth | US | ID/DL/Passport Number | State Issue: Expire | Social Security # |
|-----------|------------|----|---------------|----|-----------------------|---------------------|-------------------|
| Adams | Aaron | | MM/DD/YYYY | | A1234567 | DC:MM/DD/YYYY | |
| Brady | Michael | | 05/23/1975 | | UK12345678 | UK: Passport | |
| Cox | Sara | | 09/12/1969 | | 12345678 | DC:10/11/08 | |

All e-mailed lists should be formatted in alphabetical order by last name using an EXCEL style program, "Times New Roman", font size 10, & in portrait.