

## Rapid City Fire Department 10 Main St | Rapid City, SD 57701

10 Main St | Rapid City, SD 57701 605-394-4180

## **Appearance Request**



- For requests to be considered, it must be received no less than 14 days prior to the event.
- Completion of this form does not guarantee an appearance as call volumes dictates availability.
- Engine/Truck/Medic Companies may be required to cancel on short notice or leave the event early due to emergency situations.
- For appearance guidelines please refer to the "Fire Department Appearance Request" section of our website, http://www.rcgov.org/departments/fire-department.html

* = Indicates a required fi	eld			
Organization Name:				
Address:				
City:	State:		Zip:	
*Contact Name:				
*Contact Phone:				
Contact Email:				
* Type of Event Request	ing: Please indicate			
If requesting a Station Too Station wanting to	•			
If requesting an On Sight				
Location of On Sight Red	ηuest:			
Number of Participants:	Children:	Adults:		
*Date of Event:	Event Time (Begin & End):			
Event Title:				

Event Description: (i.e. purpose, who benefits, re	eason for request)
With my signature below, I hereby certify that the supporting documents is correct to the best of munderstand and agree to the terms and guideline Rapid City Fire Department.	ny knowledge. I further certify that I fully
Signature:	Date:
Please return this completed form along with ar	ny supporting information (flyer, letter, etc.):
Completed forms may be e-mailed to: tessa.jaeger@rcgov.org	
or mailed to: Rapid City Fire Department Attention: Tessa Jaeger 10 Main St., Rapid City, SD 57701 Phone: (605)-394-4180 Fax: (605)-394-6754	