EDWARDSVILLE POLICE DEPARTMENT

Event Request Form

Organization: _____

Event Name: _____

Address: _____ City: _____

Contact Name: _____

Telephone: _____ Fax: _____

Event/Tour/Presentation

Date: _____ Time: _____

Alt. Date: _____ Time: _____

Time Officer Needed: _____ to _____

Location: _____

Audience Size: _____ Audience Age Range: _____

Event Description:

Officer Role/Function at Event:

_____

This is a request form only. The Edwardsville Police Department will contact you regarding your request. Please type or print and fill out the form completely. If you have any questions or need additional information, please contact the Edwardsville Police Department at 618-656-2131 or fax to 618-692-7575. Thank you for your interest in the Edwardsville police Department.

Return completed forms to:
Edwardsville Police Department
333 S. Main St.
Edwardsville, IL. 62025