FLORIDA INTERNATIONAL UNIVERSITY POLICE

SPECIAL EVENTS INFORMATION

Organization: ____________________________ Telephone: ____ - ____ - _____

Street Address: __________________________ State: ____ City: ___________ Zip: ______

Name of Event: __________________________ Date: / /

Starting Time: __________ AM/PM Ending Time: __________ AM/PM

Event Location: ____________________________________________

How is the event being promoted: _____________________________________
(Radio, TV, Posters or other. Explain.)

Estimated Attendance: ______ Admission Fee: ______ Is Alcohol being served: YES NO

Brief Description of Event:
________________________________________
________________________________________

Have there been any fights, demonstrations, or any type of violence associated with the participants of this or similar events? If yes, please explain.
________________________________________
________________________________________

Location(s) where this or similar event have been held in the past:
________________________________________

Person Responsible for expenses of event: __________________________

Telephone: Business ____ - ____ - ______ Home ____ - ____ - ______
Mobile ____ - ____ - ______ Fax ____ - ____ - ______

Billing Address: __________________________ State: ____ City: ___________ Zip: ______

Email Address: __________________________

Can we send invoice to your email address: YES NO

Affirmation: I do solemnly swear the information provided is true to the best of my knowledge.

Name (Print): __________________________

Signature: __________________________ Date: / /

* Rate is $60.00 per hour for an Officer and $73.00 per hour for a Supervisor; minimum charge is two (2) hours.