

**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 \$53.00 per hour; minimum charge is two (2) hours.**