



Community Relations Special Event Form

Event: _____

Location: _____

Event Date: _____ Times: _____

Contact Person: _____ Phone: _____

Number in Group: _____ Ages: _____

Is the event indoor ____ or outdoor ____?

Do you have access to: AC power ____ PC/laptop ____ TV/DVD? ____

PLEASE NOTE:

**Our schedule fills up quickly. Every effort will be made to accommodate requests.
Please submit a minimum of 6-weeks prior to event. Thank you!**

Form can also be emailed to mwanberry@rensko.com or faxed to (518) 270-5447
Or mailed/hand delivered to Rensselaer County Sheriff's Office 4000 Main St. Troy NY 12180

For Sheriff's Office Use Only

Approved /Disapproved

Approved by: _____ Date: _____

Materials Needed: _____

Equipment Needed: _____

Assigned to: _____

Date Request Received: _____