

EVENT WORKSHEET

10 - 50 GUESTS

This Form is protected by the Privacy Act of 1974

AUTHORITY: 10 U.S.C. 8013, Secretary of the Air Force: powers and duties; delegation by and E.O. 9397. PURPOSES: Used to locate or identify personnel assigned/attached to, tenant on, or on temporary duty at the specific installation, office, base, unit, function, and/or organization in response to specific inquiries from authorized users for the conduct of business. Portions of the system are used for directory service and forwarding individual personal mail received by Air Force postal activities, and for assignment of individual mailboxes. Files may be used locally to support official and unofficial programs which require minimal locator information, membership or user listings. ROUTINE USES: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records, or information contained therein, may specifically be disclosed outside of the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: The Department of the Air Force 'Blanket Routine Uses' set forth at the beginning of the Air Force's compilation of systems of records notices apply to this system. DISCLOSURE: Furnishing the requested information is voluntary. Failure to provide the information may result in nonparticipation of the program. Privacy Act System Notice "F011 AF A - Locator, Registration and Postal Directory Files" applies.

DATE(S) OF EVENT:	EVENT:
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LOCATION:	FROM (TIME):	TO (TIME):
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COORDINATOR/SPONSOR:	RANK/GRADE:	UNIT:
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HOME PHONE:	DUTY PHONE:	CELL or PHONE AT EVENT:
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WILL ALCOHOL BE SERVED AT YOUR EVENT? YES NO

Please identify Designated Drivers on the guest list.

If YES, Sponsor's Signature is required here:

THIS WORKSHEET MUST BE TURNED-IN, EITHER IN PERSON OR BY MILITARY EMAIL, TO THE BASE ACCESS OFFICE NO LATER THAN 7 DAYS (1 WEEK) PRIOR TO THE EVENT FOR PROCESSING.

ADDRESS:	EMAIL:	TELEPHONE:
8517 20th Street, Ste 100 JBER, AK 99506 06	673sfs.identocard@us.af.mil	(907) 552-6910

FOREIGN GUESTS CANNOT BE INCLUDED ON THIS WORKSHEET.

The Guest List needs to be typed and in alphabetical order prior to submission. Digital completion of form is preferred.

Guests will be authorized to enter the installation through any gate unless otherwise specified by coordinator.

Guests will be required to show a valid State or Federal issued picture ID and upon request, be required to present current vehicle registration and proof of insurance.

I fully understand my responsibilities as a sponsor and will be responsible for my guests while on the installation. Implementation of higher Force Protection Condition (FPCON) measures may require each person to be physically escorted onto the installation.

673 ABW/CC has authority to restrict installation entry to only mission essential personnel when the local threat increases or during higher FPCONs.

Coordinator/Sponsor's Signature:

<input type="checkbox"/> APPROVED
<input type="checkbox"/> DISAPPROVED
NCOIC, Base Access

NOTE: If not completed digitally, MUST be completed in BLACK ink ONLY

EVENT WORKSHEET GUEST LIST

All fields need to be populated EXCEPTION: Driver license # for minors under 16 years old

	LAST NAME	FIRST NAME	MI	DRIVER LICENSE #	ISSUING STATE	DATE OF BIRTH	DD
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