

CAMPS FOSTER AND LESTER TRAINING AREA REQUEST FORM

1. BASE ENVIRONMENTAL OFFICE (Bldg 494, Phone 645-5970): **REQUIRED FOR ALL
EVENTS AND TRAINING EXERCISES**

WILL HAZARDOUS MATERIALS BE USED DURING THIS OPERATION?

YES / NO (CIRCLE ONE)

APPROVED / DISAPPROVED

(SIGNATURE AND DATE)

(PRINT NAME AND RANK)

2. BASE SAFETY OFFICE (Bldg 2619, Phone 623-4053): **ONLY REQUIRED FOR UNIT
TACTICAL TRAINING EXERCISES**

APPROVED / DISAPPROVED

(SIGNATURE AND DATE)

(PRINT NAME AND RANK)

3. FACILITIES ENGINEER CENTER (Bldg _____, Phone _____): **REQUIRED FOR ALL
EVENTS AND TRAINING EXERCISES**

APPROVED / DISAPPROVED

(SIGNATURE AND DATE)

(PRINT NAME AND RANK)

4. CAMP ADMINISTRATION/OPERATIONS (Bldg 494, Phone 645-7317):

TRAINING APPROVED: YES / NO

(SIGNATURE AND DATE)

(PRINT NAME AND RANK)

REQUESTING UNIT: _____

OIC AND SNCOIC: _____

PHONE NUMBER: _____

AREA REQUESTED: _____

DATES REQUIRED: _____

(START DATE/TIME and END DATE/TIME)

NAME OF OPERATION: _____

TOTAL NUMBER OF PERSONNEL INVOLVED: _____

TYPE AND QUANTITY OF VEHICLES BEING USED: _____

TYPE AND QUANTITY OF WEAPONS BEING USED: _____

PLEASE PROVIDE AN ORM WORKSHEET UPON SUBMISSION. (NOT REQUIRED WHEN REQUESTING CHAPEL, MOVIE THEATER, SPORTS FIELD OR MCCS FACILITIES.)

I understand that my unit will be held accountable and must pay for all damages to Camp grounds or infrastructure as a result of requested training.

I understand that the Camp Administration/Operations Officer must be notified of any changes to this exercise.

I understand that my unit is held responsible for the upkeep of the training area. A detailed police call will be conducted and all trash will be picked up and properly disposed of at the conclusion of the exercise. I will contact the Camp Administration/Operations Officer inspection. Phone: 645-7317.

Signature: _____ Name/Rank: _____

Date: _____