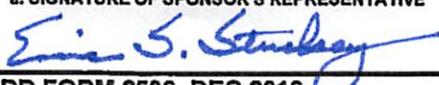


REQUEST FOR ARMED FORCES PARTICIPATION IN PUBLIC EVENTS (NON-AVIATION)			OMB No. 0704-0290 OMB approval expires November 30, 2019		
<p>The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Directives Division, 4800 Mark Center Drive, Alexandria, VA 22350-3100 (0704-0290). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE APPROPRIATE ADDRESS ON THE BACK OF THIS FORM.</p>					
ALL DATA WILL BE HANDLED ON A "FOR OFFICIAL USE ONLY" BASIS.					
PURPOSE: This form is used to request all Armed Forces MUSICAL UNIT, TROOP, COLOR/HONOR GUARD, and/or EXHIBIT/EQUIPMENT participation in public events. The information is required to evaluate the event for appropriateness and compliance with DoD policies and for coordination with the units involved. Please complete all sections.					
SECTION I - EVENT DATA					
1. SPECIFIC REQUIREMENT (i.e., Musical Unit, Color Guard, military equipment, etc.) Marching unit, 2x HMWWVs		2. DATE OF EVENT (YYYYMMDD) 20191111	3. TIME OF EVENT a. FROM: 0700 b. TO: 1300		
4. TITLE OF EVENT (and website, if applicable) Veterans Day Parade		5.a. EXPECTED ATTENDANCE	b. MEDIA COVERAGE (X all that apply) <input checked="" type="checkbox"/> Local <input type="checkbox"/> Regional <input type="checkbox"/> National		
		c. VIP ATTENDANCE (X if applicable)			
6. SITE OF EVENT (e.g., Park, Auditorium, etc.) (NOTE: This site must be accessible to and usable by persons with disabilities.) Franklin, TN		7. ADDRESS OF EVENT (Street, City, State, ZIP Code) 109 3rd Avenue South Franklin, TN 37064			
8. PROGRAM (Describe program theme and objective, audience and civic makeup, and the purpose of Armed Forces participation.) Celebration for the Veterans of Franklin, TN and the surrounding Williamson County					
9.a. HAVE OTHER ARMED FORCES UNITS BEEN REQUESTED TO SUPPORT THIS EVENT? (If so, specify.) No		b. HAS DoD SUPPORTED THIS EVENT IN THE PAST? (If so, specify previous military support.) Yes			
10. IS THERE ANY CHARGE? (e.g., admission, parking, etc. If so, specify.) No		11. IS THIS EVENT BEING USED TO RAISE FUNDS FOR ANY PURPOSE? (If so, specify how funds will be distributed.) No			
12. WILL ADMISSION, SEATING, AND ALL OTHER ACCOMMODATIONS AND FACILITIES CONNECTED WITH THIS EVENT BE AVAILABLE TO ALL PERSONS WITHOUT REGARD TO RACE, CREED, RELIGION, COLOR, SEX OR NATIONAL ORIGIN? (X appropriate box)				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
SECTION II - SPONSORING ORGANIZATION DATA					
13. NAME AND WEBSITE OF SPONSORING ORGANIZATION City of Franklin, Tennessee					
(X appropriate box for each item.)					
14. IS THE SPONSORING ORGANIZATION A CIVIC ORGANIZATION? (e.g., a non-governmental organization primarily focused on improving broad based communities at large.)				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
15. DOES THE EVENT HAVE THE OFFICIAL BACKING OF THE LOCAL GOVERNMENT?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
16.a. DOES THE SPONSORING ORGANIZATION EXCLUDE ANY PERSON FROM ITS MEMBERSHIP OR PRACTICE ANY FORM OF DISCRIMINATION IN ITS FUNCTIONS BASED ON RACE, CREED, COLOR, SEX OR NATIONAL ORIGIN?				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
b. DO ANY OF THE FOLLOWING APPLY TO YOUR EVENT? (X all that apply.)		POLITICAL EVENT <input type="checkbox"/>	RELIGIOUS EVENT <input type="checkbox"/>	IDEOLOGICAL EVENT <input type="checkbox"/>	
17. SPONSOR'S REPRESENTATIVE (Please PRINT all contact information.)					
a. NAME (Include Mr./Ms./Military Rank) Monique McCullough		b. ADDRESS (Street, City, State, ZIP Code) 109 3rd Avenue South Franklin, TN 37064			
c. PRIMARY TELEPHONE (Include area code) 615-948-3205	d. ALTERNATE TELEPHONE (Include area code)	e. FAX NUMBER (Incl. area code)	f. E-MAIL ADDRESS MONIQUEM@franklintn.gov		
SECTION III - SPONSORING ORGANIZATION SUPPORT DATA					
18. See page 2, paragraph 3 before completing this section. Please answer the following questions ONLY for musical support requests. Is the sponsor offering to: (X appropriate box for each item.)				YES	NO
a. Fund the standard Military Services allowance for meals, quarters, and incidental expenses for Armed Forces participants?				<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Fund transportation costs, meals, and hotel accommodations for unit representatives to visit the site prior to the event?				<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Fund transportation costs from home station to the event and return for Armed Forces participants?				<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Fund transportation costs for Armed Forces participants between the site of the event and the hotel?				<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Provide telephone facilities for necessary official communications at the site of the event?				<input type="checkbox"/>	<input checked="" type="checkbox"/>
SECTION IV - CERTIFICATION					
19. I am acting on behalf of the sponsoring organization and certify that the information provided above is complete and accurate to the best of my knowledge. I understand that representatives from the military services will contact me to discuss arrangements and costs involved prior to final commitments, or to inform me of their inability to support this event. I also understand that operational commitments must take priority and can preclude a scheduled appearance at an approved public activity.					
a. SIGNATURE OF SPONSOR'S REPRESENTATIVE 		b. DATE SIGNED (YYYYMMDD) 10-1-2019	c. PRINT NAME AND TITLE Eric S. Stuckey, City Administrator		

INSTRUCTIONS

1. This form is used to request Armed Forces musical unit, personnel, color/honor guard and/or exhibit/equipment participation in public events. The requested information is required to evaluate the event. Please complete all sections.

2. Armed Forces musical units are organized for ceremonial and traditional purposes and to support recruiting activities. However, they may be authorized to provide certain specified presentations, such as patriotic ceremonies for public programs. Armed Forces musical organizations are not permitted to provide entertainment, background, dinner, dance or other social music at public or private events in competition with the customary or regular employment of local civilian musicians. Limited resources permit only one band and/or choir to perform at an event, and the Military Services reserve the right to cancel support to sponsors who have scheduled more than one such military unit.

3. Department of Defense (DoD) policies require that Armed Forces participation in public events will be provided at no additional cost to the Government, which means unprogrammed costs incurred solely because of participation in or support of an unplanned activity. For example, additional costs to the Government include unplanned travel and transportation, meals and lodging for military personnel away from Government mess, civilian per diem, and overtime pay. Unsolicited contributions of money, personal property, or services (e.g., gifts in kind for lodging, meals, transportation) may be accepted for the benefit of military musical units for events that align with the DoD's mission. All costs are binding after a unit, personnel, or exhibit has arrived at an event site, even though weather conditions or other unforeseen circumstances force the event to be cancelled.

4. This form should be submitted to the appropriate Military Service (*listed in right hand column*) not less than 30 days in advance of a scheduled program. Final determination will occur no earlier than 80 days in advance. Please realize that all Armed Forces units have specific military missions and training requirements. Participation in public programs will only be authorized when such support is in the best interests of the DoD and the Military Services and does not interfere with mission or training programs. In all cases, operational commitments must take priority and can cause previously scheduled appearances to be cancelled.

5. Additional forms may be obtained on the Internet at <http://www.dtic.mil/whs/directives/forms/dd/diforms2500-2999.htm> For legibility, event sponsors are highly encouraged to fill out applicable information on-line prior to printing out the form. Submit forms through the nearest military installation public affairs office, or from any of the military public affairs offices listed to the right. If you have questions regarding information required on this form, please call the Community and Public Outreach Directorate between 8:00 a.m. and 5:00 p.m. Eastern Time, Monday through Friday (703) 695-3845.

SUBMIT COMPLETED REQUEST FORM TO:

The Public Affairs Office of the Military Installation closest to the event; OR to the appropriate Military Service listed below:

ARMY:

Community Relations Division
HQDA, Office of the Chief, Public Affairs
1600 Army Pentagon, Room 1D470
Washington, DC 20310-1500
(703) 814-3354 (fax)
www.army.mil/comrel

MARINE CORPS:

For instructions on how to request Marine Corps assets, visit:
www.usmc.mil/community
(703) 614-1034 (voice)

NAVY:

Navy Office of Community Outreach
5722 Integrity Drive, Bldg 466-3
Millington, TN 38054
(901) 874-5804 (voice)
bandsupport@navy.mil
www.outreach.navy.mil

AIR FORCE:

Office of the Secretary of the Air Force
Office of Public Affairs (SAF/PA)
1690 Air Force Pentagon
Washington, DC 20330
(703) 695-9864 (voice)
(703) 693-9801 (fax)
www.afoutreach.af.mil

Submit band requests online at
www.outreachrequests.hq.af.mil

NATIONAL GUARD BUREAU:

Submit requests to the State National Guard Public Affairs Office in the state where the event will take place. Contact information for State Public Affairs Offices is available online at
<http://www.nationalguard.mil/Resources/StateWebsites.aspx>

SPONSOR: PLEASE RETAIN A COPY OF THIS FORM FOR FUTURE REFERENCE.

20. REMARKS (Use this area to continue any items if necessary. Reference by section and item number.)