## FUNDRAISER REQUEST FORM

NAME OF REQUESTER:	Phone #	Date:
NOTICE: I (we) agree to hold harmless the Coast Gua any and all claims and causes of action that arise or m CG Base Kodiak spaces. I request authorization to hole expressly agree to indemnify and hold the United State and liability, however caused, arising out of, or in any contributed to by any negligence or alleged misconduct United States Coast Guard. I understand should an incorganization – rather than the Coast Guard – would be	ay arise from my (our) use of the Coast G d a fundraising event on Base Kodiak. If a s of America harmless from and against a way connected with this event, whether or t on the part of any employee of the Unite rident occur, the individual or individual n	fuard MWR facilities or approved, I further and all claims, loss, r not caused or d States or member of the
ORGANIZATION REPRESENTED:		
TIME(s) and DATE(s) OF THIS FUNDRAISE	R:	
DATE(s) OF LAST FUNDRAISER:		
SIGNATURE OF REQUESTER:		
<b>DETAILS OF YOUR EVENT</b> (Example – WHA Softball Field, Common area in Admin and Common the cost of a unit party). Please be as detailed and necessary.)	nissary Buildings.; PURPOSE: Funds	will be used to offset
WHAT:		
WHERE:		
PURPOSE:		

## **COORDINATION:**

Once submitted the approval process may take up to fourteen (14) days. Please plan accordingly.

## ### IT IN ALL APPROVAL: Your request to conduct a fundraiser at the times and dates indicated above is: | Approve □ Denied | De

Jeremy M. Hall
Captain, U.S. Coast Guard

Commanding Officer, Base Kodiak