



# City of Rocklin FIRE DEPARTMENT



## Presentation Request Form

Date Requested:

Time:

Duration:

(One Hour Maximum)

Location of Presentation: (Specific Fire Station Name, or Specific Address)

(location name, street address)

Name of Group or Organization:

Organization Address:

(location name, street address)

Located in Rocklin?  Yes  No

Age of Audience:

Number Expected:

Contact Person:

Contact Phone:

Alternative Phone:

Email Address:

### You will be contacted within two business days.

- Arrival times are approximate; fire Crews may be responding to emergency calls.
- The fire crew will respond to any emergency calls that may occur during your presentation. Your presentation may end early and abruptly.
- One piece of fire apparatus, such as a truck or engine, will be available for viewing and discussion.
- While at the presentation, at least one member of the fire department will discuss the "fire service life" and basic fire safety topics. Presentation format and topics may vary based on which crew is presenting.
- Age appropriate public education materials may be handed out, based on availability.
- Special requests will be honored based on the availability and the on-duty supervisor's discretion.