

AMC BAND REQUEST FOR MUSICAL SUPPORT

(For use, see: CPM 220-1)

INSTRUCTIONS

1. Point of contact for this request form is the Operations NCOIC/AMC Band @ (256) 450-8086 or DSN 320-8086/8106.
2. E-mail the completed and signed form by clicking the E-mail Form button at the top right of this form. You will receive a confirmation e-mail within 5 working days.

ALL DATA WILL BE HANDLED ON A "FOR OFFICIAL USE ONLY" BASIS

PURPOSE: This form will be used to request the U.S. Army Materiel Command Band for participation in official military functions and public events. The information is required to evaluate the event for appropriateness and compliance with DA and AMC policies, and for coordination with the units involved. Please complete all sections.

SECTION I - EVENT DATA

1. Title of Event: <div style="border: 1px solid black; height: 20px; width: 90%; margin-top: 5px;"></div>	2. Date of event	3. Time of event From: _____ To: _____
4. Briefly describe event and type of music requested. Specify performing group if known.		5. Expected attendance.
6. Site of event (<i>i.e., park, auditorium</i>).	7. Address of event (<i>street, city, state, zip code</i>).	
8. Theme of event (<i>if applicable</i>).	9. Have any other military bands been requested to support this event? (<i>if so, specify</i>)	
10. Will this event be used to raise funds for any purpose? YES <input type="radio"/> NO <input type="radio"/> If yes, please describe:	11. Will there be a charge for admission? YES <input type="radio"/> NO <input type="radio"/>	
12. Will admission, seating, and all other accommodations and facilities connected to this event be available to all persons? YES <input type="radio"/> NO <input type="radio"/>		

SECTION II - SPONSORING ORGANIZATION DATA

13. Name of sponsoring organization:	14. AMC Major Subordinate Command? YES <input type="radio"/> NO <input type="radio"/>		
15. Sponsor's representative:			
15a. Name:	15b. Primary Phone:	15c. Alternate Phone:	15d. Fax number:
15e. Address (street, city, state, ZIP code):	15f. E-mail:		

SECTION III - SPONSORING ORGANIZATION SUPPORT DATA

(AMC Band resources to support AMC events are limited. Sponsors may be required to provide funding for all or partial expenses necessary for AMC Band support).

16. Does the sponsor agree to fund the standard military services allowances for meals, quarters, and incidental expenses for AMC Band participants? (<i>Per diem and up to maximum lodging</i>).	YES <input type="radio"/>	NO <input type="radio"/>
17. Does the sponsor agree to fund transportation cost from home station to the event and return? (<i>IAW AR 220-90, par. 2-2e. Events farther than 75 miles require an over-the-road-style bus with driver</i>).	YES <input type="radio"/>	NO <input type="radio"/>
18. Does the sponsor agree to fund transportation, meals, and lodging for the advance team? (<i>If necessary</i>)	YES <input type="radio"/>	NO <input type="radio"/>
19. Does the sponsor agree to fund all costs related to acquiring an appropriate venue for the performance? (<i>i.e., stage, auditorium, raised platform stage, overhead cover, and/or adequate lighting and power</i>)	YES <input type="radio"/>	NO <input type="radio"/>

SECTION IV - CERTIFICATION

I am acting on behalf of the sponsoring organization and certify that the information provided is complete and accurate to the best of my knowledge. I also understand that the Chief of Staff, AMC, will resolve all scheduling conflicts regarding the AMC Band, which may result in the Band's cancelation of support.

20a. Name and title:	20b. Date signed:	20c. Signature of sponsor's representative:
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INTERNAL USE ONLY	MPT ASSIGNED _____	OPS NCO _____	1SG _____
	AMI _____	OPS NCOIC _____	CO _____
	LR _____		