

Baltimore City Fire Department   
Mobile Safety Center Event Request Form

Please fill out and e-mail to [**BCFD.cspevents@baltimorecity.gov**](mailto:BCFD.cspevents@baltimorecity.gov)

If you have any questions call **410-396-5752**

# All request forms must be submitted at least 30 days prior to the event.

# You will be contacted by the Mobile Safety Center’s staff within one week of your request.

I am requesting: Mobile Safety Center Workshop Table/Booth

**Event Information**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Event Name:** | | |  | | | | | **Event Date:** | | |  | | |
| **Event Address:** | | |  | | | | | | | **Zipcode:** | | |  |
| **Organization Name:** | | |  | | | | | **Website:** |  | | | | |
| **Event Time:** | | |  | | **Requested MSC Time:** | | | | |  | | | |
|  | | | (start) (finish) | | **(4hrs max)** | | | | | (start) (finish) | | | |
| **Target Audience for Event:** | | | |  | | **No. Expected to Attend:** | | | | | |  | |
|  | | | | (children, adults, families, etc.) | | |  | | | | |  | |
| **Description of Event:** | |  | | | | | | | | | | | |
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**Fees:** No fees are charged for Mobile Safety Center events within Baltimore City.

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| **Space for the Mobile Safety Center:** In order to bring the MSC to your event there must be space for the 40 feet long and 15 feet wide vehicle, similar to that of a fire truck. We are able to park on either: (1.) Flat concrete parking lot or (2.) Blocked off street. To block off the street you need to obtain a permit from Baltimore City. | |
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**Contact Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Requester Name:** | |  | **Email:** |  | | |
| **Phone Number:** |  | | **Fax Number:** | |  | |
| **Mailing Address** | |  | | | **Zip Code:** |  |

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| --- | --- |
| **How did you hear about the Safety Center? (Check all that apply)**  □ MSC Website □ Fire Department Website □ MSC Flyer/Brochure/Newsletter  □ Media (TV/radio/etc.) □ Friend/Colleague □ Attended Previous Event | |
| □ Other (please specify): |  |