FRIENDS PARRIS ISLAND APPLICATION FORM

Request the following "Friend of Parris Island" be authorized an Installation Access Pass. The duration of this Access Pass is for a maximum of twelve months from date of approval. Please attach valid copies of vehicle registration, insurance, and drivers license.

Guest's Information:

Full Name:

Address:

State/Province:

Zip/Postal Code:

Phone#/e-Mail:

Duration Requested: Duration Granted:

Full SSN:

MCRD PI G3 / SECURITY MANAGER
Parris Island, South Carolina
29905
Phone: 843-228-4174/3429/4091

FAX FORMS TO:
Fax: 843-228-3708

Description:

DOB/State Born

Height/ Weight:

Race/ Gender:

Color Hair:

Color Eyes:

Sponsor:

Organization: **The Legends Golf Course**

Name & Phone#: **Andy Hinson (843) 228-2240**

Signature:

Trade Permit Issued (if applicable):

Business on Permit:

Date Approved:

Signature:

VEHICLE YEAR	MAKE/MODEL	VEH COLOR	DL #/ STATE	PLATE #

Those personnel requesting access for business purposes must provide proof of valid and current trade permit as per DepO 5512.4K

Comments: If granted, this access pass will not be transferable and is only authorized for access to Parris Island only. The applicant agrees to comply with Federal /DOD guidelines and to consent to a local records check. Acknowledgement of this form provides Parris Island permission to conduct a routine background check on the applicant. I certify that the information on this form is true and accurate to the best of my knowledge. If the vehicle pass is lost or stolen I will immediately report it to the Military Police Department at 843-228-2304.

Requester:
Print/Signature:
Date/Time:

Approver:
Print/Signature:
Date/Time