

# 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:	<b>The Legends Golf Course</b>
Name & Phone#:	<b>Andy Minson (843) 228-2240</b>
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.

Privacy Act Information: Authority Title 10, United States Code, Section 2012:  
 Principle Purpose: **The Purpose for requesting personal information, including social security number is to verify identification of the applicant and to assist civilian access onto Parris Island.**  
 Routine Use: **Information provided may be used to determine eligibility of applicants desiring access to Parris Island as well as for other lawful purposes including law enforcement and litigation. For other official purposes, information on this form may be provided to other law enforcement agencies.**  
 Disclosures: **Submitting requested information is voluntary , however, failure to provide information will result in access privileges being refused or withdrawn under this program. The Privacy Act Statement will apply throughout the duration of the access pass.**

**Requester:**  
 Print/Signature:   
 Date/Time:

**Approver:**  
 Print/Signature:   
 Date/Time