



Cathedral City and Palm Springs Fire Department's
Joint Color and Honor Guard Request Form

Date submitted: _____

Date requesting: _____

Time of event: _____

Approximate length of total time for event: _____

Location of event: _____

Reason for event: _____

Organization requesting event: _____

Name of person requesting event and telephone numbers:

Point of contact and telephone numbers while at the event:

CCFD Fire
Chief Approval: _____

PSFD Fire
Chief Approval: _____