

SPECIAL EVENT WAIVER FOR ESCORT REQUIRED BADGES



SECTION 1 OVERVIEW	Please complete this form entirely and click the Submit button or email to BadgingOffice@slcgov.com . For events that occur after hours or on weekends, please email AirportControlCenterSupervisors@slcgov.com .		
Company Name:			
Date of Event:			
Time of Event:			
Location of Event:			
Description of Event:			
Individual Providing Escort		Badge Number	
SECTION 2 REQUESTED BY			
Last Name	First Name	Title	
Signature	Phone Number ()	Fax ()	
Email	Date	Click to Submit	
SECTION 3 AIRPORT USE ONLY	Please email a copy to departments listed below.		
Approved By		Date	

Cc: AirportControlCenterSupervisors@slcgov.com; AirportOperationsManagers@slcgov.com; Dave.Korzep@slcgov.com