

PEASE AIR NATIONAL GUARD BASE TOUR FORM

Please fill out and send this form to **157.ARW.ARW.Command.Section.Org@us.af.mil**

Subject: Base Tour Request for (enter your organization's name)

If you have questions, please call 603-430-3461

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POC Name: _____

POC Cell Number (contact for during tour): _____

POC Email: _____

Your Organization: _____

Number of People (no more than 30): _____ **Age Range of Group (12 and up):** _____

Date of Tour request (first and/or third Tuesday of each month): _____

Arrival Time: _____ **Departure Time:** _____

Type of transportation will you be arriving in:

Make: _____ **Model** _____ **Year** _____ **Color** _____

Areas you would like to tour: _____

Example: Fire Station, Operations, Aircraft Maintenance, Medical, etc.

Additional Information (additional sites not listed, special needs, etc.)