

SAFETY DEMONSTRATION REQUEST FORM

Please complete all the following information regarding your safety demonstration request. In order to allow for adequate planning on our part, you must submit your request at **least 4 weeks in advance** of your earliest preferred date. Please note, not all requests may be able to be met. Be sure to include any special requests or additional comments in the notes section.

Name:		
	zation:	
Preferr	red communication:	
DEMO	NSTRATION INFORMATION	
What d	demonstration are you interested in? (Check all that apply.)	
	High voltage: outdoors	
	Low voltage table top: indoors	
	Other:	
Do you	I have a location preference? (We will need to verify necessary connection at yo	ur requested location.)
	Delta County	
	Montrose County	
	On site at my location:	
Please	list four preferred dates for you demonstration.	
1		
3		

CONTACT INFORMATION

(include students, teachers, parents, and chaperones)
Knowledge level of your group:
How long do you intend your demo to last?
Additional Notes/Comments:

RETURN THIS FORM

Email:

safetydemo@dmea.com

Mail to:

DMEA Attn: Troy Hall PO Box 910

Montrose, CO 81401

In person:

DMEA Montrose Office 11925 6300 Rd. Montrose, CO 81401 M-F; 8AM – 5PM

DMEA Read Office 21191 H 75 Rd. Delta, CO 81416 M & W; 9AM – 4PM