



## ACTIVITY REQUEST AND OPERATIONS PLAN

Date Prepared: \_\_\_\_\_

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Activity Name \_\_\_\_\_

Date(s) \_\_\_\_\_ to \_\_\_\_\_

Event Address (home unit ☐) \_\_\_\_\_

Unit \_\_\_\_\_ Group \_\_\_\_\_

## EVENT SUPPORTS (check all that apply):

☐ Aero Ed (☐ AEX) ☐ Cadet Programs ☐ Emergency Services ☐ PD ☐ RR/PA

## Reviewer/Approver Initials

Obtain prior to submittal:

SQ CC: \_\_\_\_\_

Group CC: \_\_\_\_\_

☐ [Risk Management \(RM\) Form](#)  
must be attached before submittal

WG/SE: \_\_\_\_\_

WG/JA: \_\_\_\_\_

WG/CC: \_\_\_\_\_

EVENT TYPE (check all that apply): ☐ Fundraising ☐ High Adventure ([F60-82 required](#)) ☐ Airport Open House ☐ Airshow☐ Bivouac ☐ Documents Requiring Signatures ☐ Flightline duties/aircraft marshaling ☐ Marksmanship ☐ Model Rocketry☐ Parking, crowd, or access control ☐ Other \_\_\_\_\_

## PARTICIPANT RESTRICTIONS:

Activity open to ☐ Host Unit ☐ Host Unit's Group ☐ WAWG ☐ ALL WingsAttendees ☐ Officers Only ☐ Cadets and Officers Estimate # of Attendees Cadets \_\_\_\_\_ Officers \_\_\_\_\_EVENT DESCRIPTION & OBJECTIVES (Describe event, objectives, schedule, facilities, etc. Cadet activities must show at least two senior members attending. If overnight with cadets, you must include a [billeting plan](#). Use space on page 2 to continue this section if necessary.)

Uniform of the Day \_\_\_\_\_

Activity ☐ will not ☐ will require participation cost of \$ \_\_\_\_\_ per participant. \* ☐ Budget attached.

## ACTIVITY DIRECTOR/PROJECT OFFICER

Attending? ☐ Yes

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ CAPID: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## SAFETY OFFICER

Attending? ☐ Yes

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ CAPID: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## PUBLIC AFFAIRS OFFICER

Attending? ☐ Yes ☐ No ☐ Request WG/PA Support

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ CAPID: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

EQUIPMENT REQUESTS (PO to send copy of request to Wing depts) Operations: [do@wawg.cap.gov](mailto:do@wawg.cap.gov) Logistics: [lg@wawg.cap.gov](mailto:lg@wawg.cap.gov)

Special Equipment \_\_\_\_\_

Aircraft ☐ 172/182 ☐ 206 ☐ Glider Notes \_\_\_\_\_Vehicles ☐ Corporate ☐ POV Notes \_\_\_\_\_

List details for each Corporate vehicle used...

Vehicle ID	Location	Vehicle ID	Location	Vehicle ID	Location



Civil Air Patrol's Washington Wing  
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**Activity Name** \_\_\_\_\_

**EVENT DESCRIPTION & OBJECTIVES** (continued...)