

4. *Non-U.S. citizens are not allowed access to Whiteman AFB for Tours in 2017.*

5. Have you or your group toured Whiteman before?

___ Yes ___ No ___ I don't know

If yes, when? _____ I don't remember _____

5. Date requested for your tour:

Group's Point of Contact information:

1. Name: _____

2. Telephone number: _____

3. E-mail address: _____

Please read the paragraph below and sign (or electronically sign).

I understand that all requests will be considered, but this request does not guarantee a tour. Due to operational requirements, the 509th Bomb Wing Public Affairs office will only conduct a limited amount of tours. I understand that if my request is approved and scheduled, it is subject to change or cancellation with little or no notice due to mission requirements. Additionally, inclement weather may result in cancellation. In case of cancellation, I will be contacted as expediently as possible by the Public Affairs staff. I understand that I am responsible for my group and I will provide necessary information regarding this group.

Signature

Date