Fort Carson Army Community Service

Briefing Request Form

UNIT (CO, BN, BDE)_____

Request POC (Rank, Name)_____

POC Email Address_____

POC Phone_____

Name of Event/Briefing_____

Date/Time of Event_____

(please allow a minimum of two weeks notice)

Address/Location for Event_____

Number of anticipated attendees_____

A/V available at location? (i.e. projector, screen, sound)_____

Additional Information or questions:

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Please submit your request on this form, or in email format to:

usarmy.carson.imcom-fmwrc.list.dfmwr-w-acs-mob-deploy-readiness