Joint Base MDL – Multi-Day Event - EAL Worksheet

Purpose of the Visit: _____

Building Name/Number & Street Address: _____

Start/Arrival Date _____ End/Departure Date _____

Start/Arrival Time _____ End/Departure Time _____

THE FOLLOWING INFORMATION IS REQUIRED FOR EACH VISITOR 18 YEARS OLD AND OLDER.

Name Last, First Middle Initial	Unit Charter Number	Full Social Security Number	DATE OF BIRTH (YYYY/MM/DD)	Days of week access required	Hours of day access required

Contains PII - Password Protection Required

This document contains Personally Identifiable Information (PII) that must be protected from unauthorized disclosure. Delete/destroy as soon as practical after completing the tasking.
Encrypt with Password Protection when transmitting this document.