Firefighter Visit

Schools and community groups may request for firefighters to visit their location. Firefighter visits last anywhere from 30-90 minutes depending on group sizes. Minimum group size is 10 children. If groups are more than 25 children, the visit must be scheduled between the hours of 8am-2pm and only one grade per day can be scheduled at times. If you have more than one grade, you will need to submit a separate request form for each grade level and their visits will need to be scheduled on different days. The visit will include viewing the fire engine and equipment, as well as being presented important fire safety tips based on age appropriate lesson plans and activities. All requesting preschools, schools, groups, and organizations must be located within Ewing Township. Please be aware that the firefighters coming for a visit are "in-service" at all times, which means if there is an emergency call they will have to respond and/or the visit may have to be rescheduled with minimum notice. A parking area must be provided where the fire engine can get in and out quickly in the event of an emergency. Also, an adequate number of teachers/chaperones must be present to assist the firefighters with the children and quickly clear individuals from the fire engine if firefighters have to leave in a hurry.

Station Tour

Station tours last approximately 25-30 minutes and include viewing the fire engine, equipment, as well as talking to firefighters about their jobs and learning important fire safety tips. Maximum number of participants is 25 children (including 5 chaperones). One chaperone for every five children is required. Tours must be scheduled between the hours of 9am-7pm. The fire station will remain "in-service" during tours and may need to respond to an emergency at any time. If they do, it will be necessary for the tour to end and your group to exit the station. Only one visit or tour per day, per fire station can be scheduled. If you have more than one group, you will need to submit a separate request form for each group and their visits will need to be scheduled on different days.

Station Tour Address:

Ewing Township Fire Department Station 30 1666 Pennington Rd. Ewing, NJ 08638

Community Events

Department participation can be requested for events that are open to the public, including health fairs, book fairs, festivals, and other community outreach opportunities. Neighborhood and community groups can request for firefighters to visit your location with a fire engine. Please be aware that the firefighters coming for a visit are "inservice" at all times unless arranged otherwise, which means if there is an emergency call they will have to respond and/or the visit may have to be rescheduled with minimum notice. A parking area must be provided where the fire engine can get in and out quickly in the event of an emergency. Any special arrangements must be arranged ahead of time.

Other Requests

Please fill out the following form and provide us with as much information as you can so we can be in touch and try to accommodate your requests as best as we can.

EWING TOWNSHIP FIRE SERVICES - COMMUNITY OUTREACH

Firefighter Visit

School/Organization/G	roup Name:		
Address: (Street)			
(City, State)	Ewing, NJ	(Zip)	
Teacher/Point of Conta	act Name:		
Work Phone: ()	Extension:	
Cell Phone: ()		
Email:			
children, times need to	be between 8 a.	ze is 10 children. If your group is more than 25 a.m. and 2 p.m. Time:	
Date:		Time:	
Date:		Time:	
Comments (if any):			

Please provide an overall accurate number of children on this form so we can prepare the correct number of fire safety education kits we need to bring the day of the visit.

*When we arrive the day of the visit: Please provide us with a more descriptive list of each teacher's name, room number, and number of children in his/her class participating so kits can be dropped off during the program by a firefighter. Kits should then be distributed and sent home at the end of the day.

EWING TOWNSHIP FIRE SERVICES - COMMUNITY OUTREACH

Number of Children:	Ages:
Grade:	Number of Adults/Chaperones:
Are there any special need	ds or people with disabilities in your group? Please specify:
Firefighters remain "in-ser	vice" at all times. If there is an emergency call, they must
respond. Children may hav	ve to move away from the firetruck in a hurry. You must
provide a safe and easily a	ccessible area the day of the visit. Depending on the size of
your group, there may be o	one-three firetrucks you need an area for.
Where should firetrucks pa	ark:

PLEASE FILL OUT THE INFORMATION ABOVE AND EMAIL THE

COMPLETED FORM TO: ewingfire@ewingnj.org

IF YOU HAVE ANY QUESTIONS OR CONCERNS,

PLEASE ADD THEM TO THE EMAIL

THANK YOU!

Station Tour

Group Name:			
Point of Contact	Name:		
Work Phone: ()	Extension:	
Cell Phone: ()		
Email:			
be at least two we size of your grou	eeks in advance p. Maximum gro	ates and times that work for your gree. Please plan between 25-30 minute oup size is 25 children with 5 chaped Times need to be between 9 a.m. and Tour Address: Station 30 1666 Pennington Road Ewing, NJ 08638	es depending on the rones. 1 chaperone
Date:		Time:	
Date:		Time:	
Date:		Time:	
Comments (if any	/) :		
•		nber of attendees on this form so we ucation kits we need to have ready t	• •
Number of Childi	en:		
Ages:			
Number of Adults	s/Chaperones:		_

EWING TOWNSHIP FIRE SERVICES – COMMUNITY OUTREACH

Are there any special needs or people with disabilities in your group? Please specify:						

PLEASE FILL OUT THE INFORMATION ABOVE AND EMAIL THE

COMPLETED FORM TO: ewingfire@ewingnj.org

IF YOU HAVE ANY QUESTIONS OR CONCERNS,

PLEASE ADD THEM TO THE EMAIL.

THANK YOU!

EWING TOWNSHIP FIRE SERVICES – COMMUNITY OUTREACH

Community Event

Organization/Group Name:
Point of Contact Name:
Work Phone: () Extension:
Cell Phone: ()
Email:
Special Event (Check One): \square Public or \square Private
Name of Event:
Type of Event (Check One): \Box Birthday \Box Parade \Box Festival \Box Other:
Address of Event: (Street)
City, State) Ewing, NJ (Zip)
This should be an event that already has a set date and time. Please indicate below on the lines the date and time from start to end of the actual event. Then, in the box describe what time you would like the fire department at your event. Indicate whether you would like them to attend your event from start to finish, within a certain time frame, at the end, ust make an appearance, etc.
Date of Event: Time of Event:
Fime firefighters will attend your event (Explain):
Please provide an expected attendance number on this form so we can prepare the correct number of fire safety education kits/supplies we need to bring the day of the event. Number of Toddlers (1-4):

EWING TOWNSHIP FIRE SERVICES – COMMUNITY OUTREACH Number of Children (5-12): _____

Transcr of Official (0 12).	
Number of Teens (13-17):	
Number of Adults(18-60):	_
Number of Seniors(60+):	
Are there any special needs or people with disabilities in	your group? Please specify:
Firefighters remain "in-service" at all times (unless required there is an emergency call, they must respond. Families	
firetruck in a hurry. You must provide a safe and easily ac	•
Depending on the size of your group, there may be multip	le firetrucks you need an area for.

Where should firetrucks park:

PLEASE FILL OUT THE INFORMATION ABOVE AND EMAIL THE

COMPLETED FORM TO: ewingfire@ewingnj.org

IF YOU HAVE ANY QUESTIONS OR CONCERNS,

PLEASE ADD THEM TO THE EMAIL.

THANK YOU!

Other Event Requests

(Please Fill Out As Much Information As Possible)

School/Organization/Gro	up Name:		
Address: (Street)			
(City, State)	Ewing, NJ (Zi	p)	
Point of Contact Name: _			
Work Phone: ()	Extens	sion:
Cell Phone: ()		
Email:			
Please provide three pos need to be at least two w		es that work for your eve	ent request - dates
Date:		_ Time:	
Date:		_ Time:	
Date:		_ Time:	
Comments (if any):			
Please provide an overal supplies you need from t helmets, fire safety prese	us to help make you	• •	
Number of People (Total)			
# of Toddlers	# of Childrer	n # of Teens	
# of Adulto	# of Conjors		

EWING TOWNSHIP FIRE SERVICES - COMMUNITY OUTREACH

Are there any special needs or people with disabilities in your group? Please specify:
Do you request supplies from us, if so what supplies?
Is there any other information you can provide us about your event request?

PLEASE FILL OUT THE INFORMATION ABOVE AND EMAIL THE

COMPLETED FORM TO: ewingfire@ewingnj.org

IF YOU HAVE ANY QUESTIONS OR CONCERNS,

PLEASE ADD THEM TO THE EMAIL.

THANK YOU!