

Houstonfirst

OUTDOOR VENUES

Fish Plaza ♦ Jones Plaza

EVENT FIRST AID PLAN

TO BE COMPLETED BY LICENSEE

Event Contact: _____ Title: _____

Name of Event: _____

Event Date(s): _____

Start Time(s): _____ End Time(s): _____

Venue(s): _____

Type of Event: _____ Adult Youth

Estimated Attendance: _____ Will Alcohol be Served? Yes No

TO BE COMPLETED FIRST AID PROVIDER

Company: _____

Contact: _____ Title: _____

Office Phone: _____ Mobile Phone: _____

FIRST AID SCHEDULE:

	Number	Time Scheduled
EMT/Medical Technicians	_____	From: _____ until: _____
Ambulance(s)	_____	From: _____ until: _____
Other	_____	From: _____ until: _____
Total	_____	

First Aid Provider

Date

Please complete and return to:

Fish Plaza ■ Attn: Pam Powers ■ 510 Preston ■ Houston, TX 77002 ■ FAX: (832) 487-7001
Jones Plaza ■ Attn: Amanda DeWalt ■ 615 Louisiana ■ Houston, TX 77002 ■ FAX: (832) 487-7155