

Base Pass Information

Last Name _____
Suffix _____ (ie, Jr. Sr, II, III, etc)
First Name _____
Middle Name _____
Date Of Birth _____
State / Country of Residence _____

- 1) All the above information must be filled out. If any information is missing a pass cannot be issued.
- 2) DFMWR and the Security police at JBLM require a minimum of three weeks to process the paperwork for any event. If you are not registered for a pass and do not have this request turned in by three weeks prior to the event, you will not be able to obtain a pass.
- 3) Please note that your middle name must be in full. Please no initials or nick names.
- 4) If the pass is issued, Stop at the visitors center and have the pass validated with your drivers license. You will not need to take a number, just go to the special line and show your pass and identification, see the list of acceptable identifications.
- 5) The driver must show his pass to the gate guard along with his enhanced drivers license, Insurance and state vehicle registration. License is recommended be the enhanced type.
- 6) All persons in the vehicle 16 years of age or older must have a special event pass. and a picture ID.
- 7) Note; Security policy requires all foreign nationals (non US Citizens) to obtain a visitors pass in person in the company of an authorized sponsor (DOD, ID card holder)
- 8) If you have a carry permit, please be advised that the security police will not recognize it and may confiscate your fire arm. Please leave all hand guns at home.
- 9) All firearms brought onto JBLM must be registered at Waller Hall in accordance with JBLM 190-11. New firearm registration can be accomplished by accessing installation link http://www.lewis.army.mil/des/le_veh_registration.htm and filling out HJBFORM 816-1, 1 Sept. 2011. Visitor center personnel will instruct further guidance and direction to complete the registration process. Visitor center opens at 0800 and the ranges open at 0830. If you already have your firearms registered from the last shoot, they will be good for this shoot also.

Over

Other personnel entering with Driver

Last Name _____

Suffix _____ (Jr, Sr, II, III etc)

First Name _____

Middle Name _____

Date of Birth _____

State / Country of Residence _____

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Suffix _____ (Jr, Sr, II, III, etc)

First Name _____

Middle Name _____

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**Please mail the information to; Gilbert R. Hildebrand
619 110th Street S.
Tacoma, WA. 98444 – 5609**