SEA ISLAND ACCESS REQUEST FORM

SPONSOR APPLICATION

To request access for individuals, please complete and return this form.

For service providers operating without a business license (housekeepers, personal care givers) return this form to the Access Control Office located at the Gate House, Sea Island Causeway. Monday through Friday, between 8 a.m. and 4 p.m.

Today's date: _____ Sponsor's name: _____

Sponsor's telephone number: _____ or: _____

Sponsor's account number:_____ Cottage number: _____

Reason access is required: _____

Time access is required (day of week and duration of time needed): _____

Name of person **sponsored** (*please print*): _____ Phone number: _____

Person Sponsored Vehicle Information:

Year _____ make_____ model _____color_____and tag # _____

To my knowledge, this individual does not work for any business or agency.

Signed _____ Date _____

Do not write below this line.

ACCESS CONTROL USE ONLY

Issuance of pass authorized by:

Name (*please print*): _____

Signature _____ Date _____

Application must be delivered or faxed by the sponsor to the Access Control office.

Please call the Access Control office at 912-638-5830 with questions or fax to 912-634-3903.