



Bridgeport Bluefish Appearance Request Form

Event: _____

Event date: _____ **Event time:** _____ to _____

Preferred appearance time: _____ to _____

Appearance location: _____

Special instructions for location upon arrival to event: _____

Contact name: _____ **Contact phone #:** _____

Day of event contact: _____ **Day of event phone #:** _____
(If different than contact above) (If different than # above)

Appearance type (check one): _____ Mascot _____ Player

Description of event and what is expected of mascot or player:

*Submitting this form does not guarantee an appearance. You will be contacted by the Bridgeport Bluefish to confirm that the appearance has been scheduled.

Signature: _____ **Date:** _____