

**Grand Forks Air Force Base  
Tour Request Form**

319th Reconnaissance Wing Public Affairs Office  
575 Tuskegee Amn Blvd., Bldg 418 Rm 121,  
GFAFB ND 58205

Phone: 701-747-5023  
Email: [319rw.pa@us.af.mil](mailto:319rw.pa@us.af.mil)

Greetings! Thank you for your interest in touring Grand Forks AFB, North Dakota. We take pride in our mission here and do our best to accommodate the interests of all involved. To offer the best tour program possible, we require the following:

**General:** Base tours are offered on an as-available basis Monday-Friday between the hours of 0800-1630. Due to weather & safety concerns, there will be no tours during the off-season months: November – February

**Advanced Notice:** The below information must be submitted to the Public Affairs office at least one (1) month prior to the primary tour date. Included with the request form must be a roster of all anticipated participants.

**Tour Size:** Groups must be at a minimum ten (10) people with a maximum of forty (40). Base buses are not available to pick up or drop off groups outside of the base.

**Rosters:** A blank copy of an Entry Access Request will be provided upon acceptance of your tour request. Anyone anticipated to come must be added with their complete information. For security purposes, not all individuals will be granted access to the installation. Information sent on the rosters are handled in accordance with the Privacy Act of 1976.

While we appreciate the support and interest in our base, due to mission requirements we are not able to fulfill all tour requests. In such instances, a static display airpark is open to the public outside of the main gate.

Please fill out the below information completely, save and submit it through the Public Affairs Productivity Portal (P3): <https://safpa.appianportalsgov.com/request/page/request>

If you have any questions, please call us at 701- 747-5023.

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Name of Group (school/organization):

Organization Affiliation (school, cadets, industry):

Number of Attendees (including chaperones):

Age Ranges:

Primary Date:

Alternate Date:

Alternate Date:

Time:

Time:

Time:

Why does your group want to tour Grand Forks AFB?

**CONTACT INFORMATION**

(Primary) Name:

Address:

Phone:

Phone:

Email:

(Alternate) Name:

Address:

Phone:

Phone:

Email:

Visitors with disabilities or special needs:

Please tell us how we can accommodate your visit: