

BANNER ORDER FORM

Contact Name: _____

Address: _____

Phone Number: _____

Email: _____

Full Name & Rank of Person in Photo: _____

Era of Service (choose from the following):

CIVIL WAR
1861-1865

SPANISH AMERICAN WAR
Apr 1898 - Aug 1898

WWI
Apr 6, 1917 - Nov 11, 1918

WWII
Dec 7, 1941 - Dec 31, 1946

KOREAN WAR
June 27, 1950 - Jan 31, 1955

VIETNAM CONFLICT
Feb 28, 1962 - Nov 7, 1975

COLD WAR
Sept 2, 1945 - Dec 26, 1991

PERSIAN GULF WAR
Aug 2, 1990 - Aug 31, 1991

GLOBAL WAR ON TERROR
Sept 22, 2001 - Present

Branch of Military: _____

Years in Service: _____

PHOTO RELEASE

I hereby grant the use of the enclosed photo, in the Hometown Heroes Banner Program for O'Fallon, IL, without payment or other consideration.

Signature: _____

Printed Name: _____ Date: _____

MAILING

Banners are **\$110 each**. Please detach the above form, fill it out, and mail it with a photo to 413 East First St O'Fallon, IL 62269.

MAKE CHECKS PAYABLE TO AMERICAN LEGION POST #137