

RSVP

MUST BE RECEIVED BY
28 OCTOBER 2026

2026

OKLAHOMA MILITARY
HALL OF FAME

Payment information: *(A portion may be tax deductible)*
Please make checks payable to **OKMHF**

TOTAL=\$_____

☐ Check ☐ Visa ☐ Mastercard

Expiration Date _____ / _____ CVV _____

Signature _____

Name *(print)* _____

Address *(print)* _____

City *(print)* _____ State _____ Zip code _____

Phone # _____

Email _____

For online payment/donation, go to: **WWW.OKMHF.ORG**

(Eventbrite has additional online charges)

For further information email: **INFO@OKMHF.ORG**

PLEASE RETURN TO SENDER:

OKLAHOMA MILITARY HERITAGE FOUNDATION
P. O. BOX 30658
EDMOND, OK 73003



27TH ANNUAL
BANQUET & INDUCTION
CEREMONY
7 November 2026

**Embassy Suites Norman
2501 Conference Drive
Norman, Oklahoma**

REGISTRATION STARTS 5:00 PM
RECEPTION/CASH BAR 5:30 PM
SEATING BEGINS 6:00 PM
WELCOME 6:30 PM



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FOR SEATING, PLEASE CHECK YOUR HONOREE:

- | | |
|---|---|
| ☐ SGT Mad Bear, USA | ☐ MajGen Albert Logan, USAF |
| ☐ CPT Eugene Boyt, USA | ☐ BrigGen Ben Robinson, USAF |
| ☐ 1LT Daniel Griswold, USA | ☐ MSG Jack Rogers, USA |
| ☐ Col Charles Kegelmann, USAF | ☐ LTC Russell Tate, USA |
| ☐ SFC Richard Lake, USA | ☐ 2Lt George Weaver, USMC |
| ☐ CPT Michael Lapolla, USA | ☐ CPT Ivan Weaver, USA |
| ☐ Group: Oklahoma Vietnam War
Dustoff/Medevac Crewmembers | ☐ All Honorees |

DONATION/TRIBUTES: (OKMHF is a 501(c)(3) non-profit; donation may be tax deductible)

- ☐ In memory of _____ in the amount of \$ _____
- ☐ In honor of _____ in the amount of \$ _____
- ☐ I want to be a supporter of the OKMHF in the amount of \$ _____

RESERVED SEATING:

Reserve _____ seat(s) at \$95.00 each place setting \$ _____

Reserve _____ table(s) for 10 at \$950.00 each table \$ _____

A livestream of the evening will be available for \$35. See OKMHF.org website for link to sign up and payment. Professionally prepared **DVDs** with interviews of living inductees will be available approximately four months after the event for \$25 each, plus shipping. We will also have an 88-page hardback **Memory Book** of photos from the event for \$65, plus shipping.

NAMES OF ATTENDEES (10 SEATS PER TABLE): (Please provide full name, title, military rank if applicable, relation to honoree, and meal choice.)

MEAL CHOICES: **C** - Chicken, **S** - Salmon, **V** - Vegetarian, **SD** - Special Diet (specify)

(ALL meals are gluten-free)

Meal Choice

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
Please list any special accommodations you may need:	