## **Forest Legion Branch 176**

## MEMORIAL BANNER PROGRAM

## **Order Form**

Date:	Contact Name:
Address:	
Phone Number:	Email:
Relationship of Sponsor to	Service Member:
Infor	te: Contact Name: Idress: Idress: Information as it will appear on the Banner    Information as it will appear on the Banner    Il Name of Service Member as it will appear on the Banner:    te of Birth: Date of Death:    anch of Service/Theater of Service (WWI, WWII, Korea etc.)    onsor's Name as it is to appear on the Banner:    oto Release: I hereby grant permission for the use of the service member's photo in the nner Project, as it is a likeness of myself or a relative without payment or consideration.    gnature: Printed Name:    ease bring completed form, sponsorship fee and photo to Forest Legion, Br 176, Albert St., Forest, ON NON 1J0   ease make cheque payable to Forest Legion Branch 176 — Banner Program   tal Amount Enclosed \$ (175.00 per Banner)
Full Name of Service Mem	ber as it will appear on the Banner:
Date of Birth:	Date of Death:
Sponsor's Name as it is to	appear on the Banner:
Photo Release: I hereby g	rant permission for the use of the service member's photo in th
Signature:	Printed Name:
58 Albert St., Forest, ON N Please make cheque paya	ON 1JO ble to Forest Legion Branch 176 – Banner Program