



BANNERS TO HONOR HOMETOWN HEROES VETERANS & ACTIVE-DUTY MILITARY

Fill out the form below and return to ESHP, PO Box 46, Everglades City, FL 34139 or ESHP@hotmail.com

By filling out this form, I or a family member give the Everglades Society for Historical Preservation Inc. permission to use a picture, name, years of service and military branch of service on a banner to be displayed in public spaces determined by Everglades Society for Historical Preservation, Inc.

NAME of Veteran or Active-Duty Personnel

BRANCH of Service: Air Force, Army, Coast Guard, Marines, National Guard, Navy, Other

Years of Service _____

Service Ranking _____

CONTACT

Who is filling this form out? Self, Family Member, other _____

Your Name _____

Your Phone _____ Email _____

You will be contacted by a committee member to make arrangements to get a photograph of each Veteran and Active-Duty Service member, in Uniform. We realize these are valuable family photos and we will make every effort to get with you to acquire a copy of the photo.

The success of this project is dependent on your help locating, identifying and submitting this form and a picture to the committee.

Thank you for your assistance in this project – Celebrating our Homegrown Heroes!



**EVERGLADES SOCIETY FOR
HISTORIC PRESERVATION**
Dedicated to our Unique History
P O Box 46, Everglades City, FL, 34139
ESHP@hotmail.com • www.eshp.org