



Suquamish Warriors
Request for Color Guard

Person Requesting Color Guard _____

Phone number of Requester _____

Email Adress of Requester _____

Date of Request _____ Date of Event _____

Name of the Event _____

Location of the Event _____

Adress (Street) _____ (City) _____

Please select Flags to be use at the Event (Circle Below)

Eagle Staff / US Flag / Suquamish Tribal Flag / POW-MIA / Canadian /
Washington State / Suquamish Warriors / US Army / US Marine Corps / US
Navy / US Air Force / US Coast Guard

Date and Time for Posting of Colors _____

Date and Time for Retirement of Colors _____

Approved by: Jim Henry Jr/President Suquamish Warriors