



**SPECIAL EVENTS VETERAN/SERVICE MEMBER INFORMATION FORM**

Name \_\_\_\_\_

Branch of Service \_\_\_\_\_

Years Served     \_\_\_ \_\_\_ to \_\_\_ \_\_\_

Rank at Discharge or Current Rank     \_\_\_\_\_

Relationship to Contractee     \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Date of Event \_\_\_\_\_

**The above information is to be completed, signed and returned with your deposit before a contract can be issued.**