



THE WAR MEMORIAL

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.