



CONTACT INFORMATION

Contact Name: _____

Address: _____

Phone Number: _____

Email: _____

HERO INFORMATION

Full Name and Rank of Person in Photo: _____

Branch of Military: _____

Years in Service: _____

ERA OF SERVICE (Select One)

- | | |
|---|--|
| <input type="checkbox"/> Civil War (1861 – 1865) | <input type="checkbox"/> Korean War (June 27, 1950 – Jan 31, 1955) |
| <input type="checkbox"/> Spanish-American War (Apr 1898 – Aug 1898) | <input type="checkbox"/> Vietnam Conflict (Feb 28, 1962 – Nov 7, 1975) |
| <input type="checkbox"/> WWI (Apr 6, 1917 – Nov 11, 1918) | <input type="checkbox"/> Persian Gulf War (Aug 2, 1990 – Aug 31, 1991) |
| <input type="checkbox"/> WWII (Dec 7, 1941 – Dec 31, 1946) | <input type="checkbox"/> Global War on Terror (Sep 22, 2001 – Present) |
| <input type="checkbox"/> Cold War (Sep 2, 1945 – Dec 26, 1991) | |

PHOTO RELEASE

I hereby grant the use of the enclosed photo in the Hometown Heroes Banner Program for the City of Lincoln without payment or other consideration.

Signature: _____

Printed Name: _____ Date: _____

SPONSOR INFORMATION (OPTIONAL)

Place the following sponsor name on the banner: _____

PAYMENT INFORMATION

Banners are \$218.00 each. Please fill out this application and mail it with a photo to:

City of Lincoln

600 Sixth Street

Lincoln, CA 95648

Attn: Hometown Heroes

Make checks payable to: City of Lincoln