

## MILITARY AND VETERAN BANNER APPLICATION FORM

- Complete this order form. Please submit one per honoree.
- Please submit a high-resolution digital image.
- Mail or deliver order form and payment to:

Cascade City Hall  
Attn: City Clerk  
320 1<sup>st</sup> Ave W  
P.O. Box 400  
Cascade, IA 52033  
Email: admin@citycascade.com

- 39 banner locations are available – spots will be filled on a first come, first serve basis as payment is received.

### HONOREE:

Name: \_\_\_\_\_ Years of Service: \_\_\_\_\_

Branch of Service:  Army  Navy  Marine Corps  Coast Guard  
 Air Force  National Guard

Select One:  Veteran  Active Duty Select One:  Living  Deceased

Honored By: \_\_\_\_\_  
(i.e. individual, family, business, or family of.... Limited to 2 lines at 27 characters each, including spaces)

Connection to Cascade: \_\_\_\_\_

### APPLICANT/PAYEE:

Name: \_\_\_\_\_

Relationship to Honoree: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### PAYMENT INFORMATION:

Amount Due: \$100 Paid by: (select one):  Cash  Check # \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

#### FOR OFFICE USE ONLY

FORM \_\_\_\_\_ PAYMENT \_\_\_\_\_ PHOTO \_\_\_\_\_ TAKEN BY \_\_\_\_\_