

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 1st 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 _____