



TOWN OF ROME MILITARY HONOR WALK

Veteran & Service Member Banner Application

A Joint Community Initiative of the Town of Rome and the American Legion Auxiliary Ryan Larson Unit #65

Honoring Those Who Served Our Country



1. HONOREE INFORMATION

Name as it should appear on the banner:

First Name: _____

Last Name: _____

Rank/Title: _____

Branch of Service:

☐ Air Force

☐ Air National Guard

☐ Army

☐ Army National Guard

☐ Coast Guard

☐ Marine Corps

☐ Navy

☐ Space Force

Years of Service: _____

Service Era:

☐ Global War on Terror (2001 – Present)

☐ WWII (1939 – 1945)

☐ Persian Gulf War (1990 – 1991)

☐ WWI (1914 – 1918)

☐ Cold War (1945 – 1991)

☐ Spanish American War (1898)

☐ Vietnam War (1965 – 1973)

☐ Civil War (1861 – 1865)

☐ Korean War (1950- 1953)

2. BANNER SPONSORSHIP INFORMATION

Your Name: _____ **Relationship to Honoree:** _____

Address: _____ **City/State/ZIP:** _____

Phone: _____ **Email:** _____

Honored by Name: _____ **NOTE:** This name will appear on the banner as "Honored By". Example: Honored by The Smith Family or Honored by Jane, Joseph & Stephanie Smith

3. DISTINCTIVE SERVICE MEDALS/RIBBONS/BADGES (Ex: Purple Heart; Medal of Honor; Expert Rifle Badge, etc.)

NOTE: Medals/Services Ribbons/Badges will not be printed on the banner. However, they will be referenced during individual service member writeups promoting the program.

4. PHOTOGRAPH

Please provide a clear, high-resolution photograph of the honoree.

☐ I am submitting a digital photograph by email to Lisa or Sue (addresses below)

☐ I am delivering a printed photograph to the Town of Rome; 1156 Alpine Dr.

5. BANNER SPONSORSHIP

Banner sponsorship: \$100

☐ I have enclosed payment.

**If paying by check, please make check payable to: Town of Rome 1156 Alpine Dr. Nekoosa, WI 54457*

☐ I will submit payment online at: [PayGov](https://www.pay.gov) **NOTE:** PayGOV.us. the service provider, charges a 2.75% convenience fee for payment processing.

**Net proceeds support the American Legion Auxiliary Ryan Larson Unit #65 in their efforts to support veterans & their families.*

6. AUTHORIZATION & CERTIFICATION

I understand that the Town of Rome Military Honor Walk banner will be created using the information and photograph submitted with this application.

I authorize the Town of Rome, the American Legion Auxiliary Ryan Larson Unit #65 and its designees to use the honoree's photograph and submitted information in connection with the Military Honor Walk program, including the banner, town website, social media, promotional materials, programs, and related community recognition.

I understand that banner placement is determined by the Town of Rome based upon available locations and that banners will be displayed during the designated Military Honor Walk display period of Memorial Day through Veterans Day.

Applicant Signature: _____ **Date:** _____

QUESTIONS/CONTACT INFORMATION:

For any questions related to the banner program, please contact:

Sue Giardino – (608) 403-6879 sgiardino0910@gmail.com

Lisa Semrow – (608) 897-5696 lisaasemrow@gmail.com

FOR TOWN USE ONLY

Date Received: _____ Amount received: \$ _____

Photo Received: ☐ Digital ☐ Printed ☐ Pending

If printed photo provided, photo returned:

Date: _____ Returned to Name: _____

Banner Returned/Released: _____

Notes:
