



Hamilton Hometown Hero Banner Program Application

Hometown Hero Honoree Information

Honoree: _____

Rank, First Name, Middle Initial, Last Name*

*Spelling of Service Person's name on the banner will be taken directly from application.
Please write legibly and include the name exactly as you would like to see it on the banner.

Is the Honoree a resident or former resident of Hamilton? CURRENT FORMER

Is the Honoree LIVING DECEASED

Honoree Dates of Service: _____

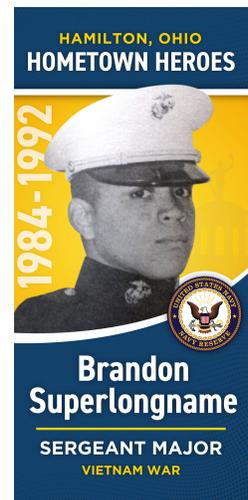
Branch of U.S. Military:

- U.S. Army U.S. Navy U.S. Coast Guard
 U.S. Marine Corps U.S. Air Force Space Force

Era of Service: (CHECK ALL THAT APPLY)

- War Between the States: 1861 - 1865
 Spanish-American War: April 1898 - August 1898
 World War I: April 6, 1917 - November 11, 1918
 World War II: December 7, 1941 - December 31, 1945
 Cold War: September 2, 1945 - December 26, 1991
 Korean Conflict: June 27, 1950 - January 31, 1955
 Vietnam Conflict: February 28, 1962 - November 7, 1975
 Persian Gulf War: August 2, 1990 - August 31, 1991
 Global War on Terror: September 22, 2001 - Present

Sample Banner



Medals & Awards:

- Purple Heart Bronze Star Silver Star Medal of Honor Distinguished Service Award

Is the Honoree:

- POW (Prisoner of War) MIA (Missing in Action) KIA (Killed in Action)
 Still Living (Must sign photo release of acknowledgement)

What You Need to Submit:

- Application
- 5X7 high quality photo of the Service Person in uniform
(Photo will not be returned, **please do not send original photo**)
- Military Verification Form (e.g., Military ID, DD214, DD215, etc.)
 - Verify military records online by visiting: www.archives.gov/veterans/military-service-records/
- Payment of \$180.00

Check or money order payable to: **Hamilton Community Foundation**

Please reference "Hometown Heroes Banner"

[Click here to pay online](#)

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Applicant Contact Information:

Please complete the following information to allow us to contact you, should we have any questions.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Relationship to Service Person: _____

Please submit the application, photocopy, proof of honorable discharge, release form and payment to:

Hamilton Community Foundation
Hometown Heroes Banner Program
319 North Third Street
Hamilton, OH 45011

FOR ALL QUESTIONS AND INQUIRES:

Email: hamiltonhometownheroesbanner@gmail.com

Call: (513) 403-2225

PHOTO RELEASE ACKNOWLEDGEMENT:

I HEREBY GRANT PERMISSION TO USE THE ATTACHED PHOTO IN THE HAMILTON HOMETOWN HEROES BANNER PROGRAM, WITH THE UNDERSTANDING THAT THIS PHOTO, OR ITS LIKENESS, MAY BE USED FOR PROMOTIONAL USE. I ALSO UNDERSTAND AND HOLD THE HAMILTON HOMETOWN HEROES BANNER COMMITTEE HARMLESS FOR ANY SUBMITTED INCORRECT INFORMATION, OR ANY ACTS OF NATURE OR VANDALISM THAT MAY DAMAGE OR DESTROY ANY SPONSORED BANNER. THE HAMILTON HOMETOWN HEROES COMMITTEE RESERVES THE RIGHT TO APPROVE ALL BANNERS, AND AS THIS IS A SPONSORSHIP, NO REFUND WILL BE GIVEN.

Signature: _____ Date: _____

Printed Name: _____