



BANNER SPONSORSHIP AGREEMENT

SPONSOR'S INFORMATION (please complete)	SPONSORSHIP	SPONSORSHIP DATES
Contact Name: _____ Address: _____ City: _____ ST: _____ ZIP: _____ Tel: () _____ E-mail: _____	_____ Sponsorship @ \$ _____ ea. Total Due \$ _____ Paid for by: <input type="checkbox"/> Cash <input type="checkbox"/> Check Date Received: _____ Received by: _____	Sponsorship Date(s):** <input type="checkbox"/> _____ <small>**Exact dates of display may be subject to change without notification. Weather, unforeseen circumstances or other events may cause slight changes in the length of display time and/or interruptions during display period.</small>

Honoree Name: _____ Branch of Service: _____ Rank: _____ Dates of Service (Year to Year): _____ Major War(s) Fought in: _____	Sponsor's Name: (Exactly as it is to appear on banner - 32 characters or less.) _____ Additional Info: (Prominent Awards / Medals - Up to 2 allowed. Space permitting.) _____ _____
NOTE: Due to space limitations, some information provided may not make it onto banner. Information provided may be subject to DD214 verification.	

Date Signature of Sponsor

Date Printed Name of Representative

NOTE: This form is for your internal use only. Information on this form must be keyed into your online Military Tribute Banners ordering page manually to submit order.



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