Mason Veterans and Active Military Program Application

APPLICANT CONTACT INFORMATION (required for all programs)			
Address	Email		
Yard Sign (\$25 each) QuantMason Veterans Memorial CPurple Heart Memorial Ston	(check all that apply) r affiliated members) *Please fill out section 1 below ity # *Please fill out section 1 below Commemorative Brick (\$50) *Please fill out section 2 below e (sponsored by American Legion Post 194) *Please fill out section 3 below Stone (sponsored by American Legion Post 194) *Please fill out section 4 below		
Section 1 (Banner and Yard Sign In	formation)		
Branch of the Military Purple Heart Recipient? Yes 🗌	oto of honored military member with application		
	rial Commemorative Brick Information)		
Please complete the below with you length including spaces. Each block	r personal message. Engraving is limited to three lines with twenty characters in represents one character.		
	*		
This brick recognizes a veteran or a	ctive military member: Yes 🔲 No 🗌		
Section 3 (Purple Heart Memorial	Stone)		
Veteran Name War/Conflict	Branch of Military Year Received		
Section 4 (Gold Star Family Memo	rial Program)		
Fallen Soldier Name			
* *	Please submit form and payment to: American Legion Post 194 Attn: John Looker		

401 Reading Road Mason, OH 45040

Checks can be made payable to the American Legion Post 194. Form and Payment must be received by April 15 for completion by Memorial Day. Form and payment must be received by September 15 for completion by Veterans Day.

Signature of Applicant _	Date	e