



City Of Barstow Military Banner Program Application



| MILITARY SERVICEPERSON INFORMATION | | | |
|---|---|------------------------------|------------------------|
| Name of Serviceperson: | | | |
| | First | Last | MI (if used on banner) |
| <i>Spelling of Serviceperson's name on the banner will be taken directly from the application</i> | | | |
| Is Serviceperson a resident of the City of Barstow? | Yes <input type="checkbox"/> | *No <input type="checkbox"/> | |
| Branch of the U. S Military Service: | U.S. Army <input type="checkbox"/> | | |
| U.S. Marine Corps <input type="checkbox"/> | U.S Air Force <input type="checkbox"/> | | |
| U.S. Navy <input type="checkbox"/> | U.S. Coast Guard <input type="checkbox"/> | | |

| APPLICANT INFORMATION | |
|---|--|
| Name of Applicant: | |
| Relation to Serviceperson: <i>(Immediate family member only)</i> | <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Sibling |
| Address: <i>*(Family member must be a resident of Barstow if Serviceperson is not)</i> | |
| Phone number: | (mobile) _____ (home) _____ |
| Email: | |

Copy of the following documents must be submitted with the application:

- ✓ **Proof of Active Military Status and**
- ✓ **Proof of Residency of Applicant or Serviceperson**

Every effort will be made to include all requests; however, in the event that the number of qualified applications exceeds the available space for the current program, the City of Barstow reserves the right to determine final placement of names at their sole discretion.

Please submit application to:
City of Barstow
Attn: Military Recognition Banner Program
220 E. Mountain View St.
Barstow, CA 92311

Please contact Maribel Hernandez at (760) 255-5195 with questions.
MHernandez@BarstowCA.org

For Office Use Only

| | | |
|---|------------------------------|-----------------------------|
| Date Received: | | |
| Residency verification provided: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Proof of Active Military Status provided: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Date of Installation: | | |
| Location of Banner: | | |
| Date Banner was removed: | | |