



Remembering Our HEROS

Honoring our Veterans, Past and Present

A Project of The Hilliard Action Committee

Name of Hero (PLEASE PRINT):

First M.I. Last

Is your Loved one:

Living

Deceased

Killed in Action

BRANCH OF SERVICE: (Please choose one)

Air Force

Army

Coast Guard

Marines

Navy

Space Force

Merchant Marines

Name of Heros Sponsor : _____

(Person responsible for submission & payment)

Mailing Address: _____

Phone: (____) _____ - _____

Email: _____

I allow "Remembering Our Heros", Town of Hilliard/Hilliard Action Committee and participating volunteers to memorialize my loved one who served in The United States Military by placing their name on a marker that resembles a cross and will display an American Flag for your deceased loved one. I understand that the memorials will be placed beside Town Hall. I agree to pay a \$30 fee for a marker. Hilliard Action Committee and participating volunteers will maintain the display.

PRICES MAY INCREASE DUE TO MATERIAL COST.

Signature: _____ Date: _____

Payment Type: _____ Amount: _____

Make Checks payable to Town of Hilliard P.O. Box 249 Hilliard Fl. 32046
In Memo put "Remembering Our Heros"