ROCK COUNTY VETERANS BANNER PROGRAM

The Rock County Veterans Banner Program was created in 2023 for Rock County to honor its past and present veterans for their service to our country and in turn, encourage a new generation to provide service to their country. The banner acts as a symbol of our gratitude that pays tribute to the commitment and courage displayed by individuals who have served in the Armed Forces.

CRITERIA: To qualify for the Veterans Banner Program, the following criteria must be met:

- The honoree is a present or past member of the United States Armed Forces
- The honoree is a current, former or deceased resident within Rock County or have ties to Rock County
- The honoree must have an honorable discharge
- The applicant must be the honoree or close living relative/associate to the honoree
- The right of use of the honoree's name, military service information and photograph submitted with the application must not have been assigned or transferred to another person

PROCEDURE:

- Submit completed form along with a photograph of the honoree in military uniform; the photo should be 5 X 7" OR larger; digital photographs with a resolution of 300 dpi or higher will also be accepted
- Applications will be accepted through May 1, 2024
- Applications will be assigned a number and selection will be by random drawing should the number of application be more than the number of spots available
- Banners will be raised for a minimum period of one season to a maximum period on two seasons
- Veterans banner season is from approximately July 1st through fall
- Every effort will be made to return the banner to the applicant when banner is no longer used
- Applications will not be processed without complete information, payment and photo
- Payment of \$125 must be received at time of application; if applicant is not drawn for the year, payment will not be processed

APPLICANT INFORMATION AND CERTIFICATION:

Name:	Phone Number:
Street Address:	City/State/Zip:
Email Address:	Relationship to Veteran:
Alternate Contact:	Alternate Phone:
Alternate Email:	Relationship to Veteran:

PAYMENT: Circle payment type; write checks to Luverne Area Chamber – Veterans Banner

CHECK	САЗП	CREDIT CARD		
Credit Card Company:	Number:	Exp. Date:		
Name on Card:	Zip Code:			

CDEDIT CARD

SEND OR DELIVER APPLICATION TO: LUVERNE AREA CHAMBER | 213 E LUVERNE ST | LUVERNE MN 56156

Questions or additional information: 507.283.4061 | luvernchamber@co.rock.mn.us

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FIRST NAME	MIDDLE INITIAL	LAST NAME

BRANCH OF SERVICE and RANK: Please mark by branch of service and fill in rank

BRANCH OF SERVICE	<u>RANK</u>
AIR FORCE	
AIR NATIONAL GUARD	
ARMY	
ARMY NATIONAL GUARD	
GOAST GUARD	
MARINE CORPS	
NAVY	
RESERVES (indicate branch)	
SPACE FORCE	

ERA OF SERVICE: Optional

GLOBAL WAR ON TERROR (September 22, 2001 – Present)
COLD WAR (September 2, 1945 – December 26, 1991)
VIETNAM CONFLICT (February 28, 1972 – November 7, 1975)
KOREAN WAR (June 27, 1950 – January 31, 1955)
WWII (December 7, 1941 – December 31, 1946)
WWI (April 6, 1917 – November 11, 1918)
SPANISH – AMERICAN WAR (April 1898-August 1898)
CIVIL WAR (1861 – 1865)

YEARS OF SERVICE: Optional

YEAR OF ENLISTMENT
YEAR OF DISCHARGE
ACTIVE DUTY (will be indicated with a blue star)

TYPE OF PHOTO PROVIDED: DIGITAL PHOTOGRAPH

APPLICATION CERTIFICATION:	(must read and sign before	ore application processed)
l,	hereby certify tl	nat I am the honoree, close living relative or associate to the
honoree. I further certify that r	ight to use the honoree's	s name, military service information & photograph submitted
has been assigned to me.	Applicant's Signature: _	Date:

FOR OFFICE USE ONLY:	
Date Application Received:	Date of Payment Processing: