

Standish Veteran's Banner Program

Sponsor Information

Name: _____

Address: _____

Phone number: _____

Email Address: _____

Two Year Sponsor: \$200.00

Honoree Information

Name: _____

Branch of the Military Served: _____

Rank Upon Completion: _____

Years of Conflict Served: _____

Please circle all that apply: Active Duty Veteran Living Deceased

*****Do not send money until you are notified that you are selected**

Do you certify that the sponsor or honoree lives, works, or actively volunteers in Arenac County, Michigan? YES NO

Signature: _____ Date _____

Applications can be returned to the City of Standish in person or mailed to:
City of Standish P.O. Box 726, Standish, MI 48658.

Photo/Commentary Release Form

Permission to use Photograph and Commentary

- Name of person in photograph/commentary

- Location of photograph if known

- Printed name of individual/entity granting permission to us photograph

By signing below, the individual listed above is granting permission for the City of Standish to use the above described image/commentary for the City of Standish veterans Banner Program. The city of Standish will have the right to reproduce the image on a banner and will have the right to use the photo/commentary on newsletters, social media, website, etc. to advertise the banner program. The City of Standish acknowledges that the primary use of the photo/commentary described above is to recognize the banner program.

Signature _____ Printed name _____

Title/Organization _____

Address _____ Date _____