



www.TriStateMilitaryMoms.com

Military Recognition Program Nomination Form

Honoree Information

First Name: _____ Last Name: _____
Branch of Military Service: _____ Rank: _____
Anticipated date of discharge (if known): _____

Nominee Information

Name: _____ Relationship to honoree: _____
Address: _____
City: _____ State: _____ Zip: _____
County: _____ Phone Number: _____
Email Address: _____
Contact Name (if different): _____
Contact Phone: _____ Email Address: _____

I wish to make a donation to the program \$ _____ (enclosed with application)

Checks made payable to: Tri-State Military Moms, Inc. Donation does not reflect in decision process of nominee

I acknowledge that the information on this form is complete and accurate. I understand that there is no charge to the honoree or nominee family for banner production or installation; however, I may donate to the program. I also acknowledge that the program will only replace or repair banners that are damaged or destroyed due to sun, weather, wind, age, vandalism or stolen, if funds and resources are available. A banner may be removed at any time at the discretion of the Bullhead City Area MRP Steering Committee, if the honoree no longer meets the criteria, or the banner is damaged. The program reserves the right to crop, resize, lighten, or enhance the photograph to fit the design requirements of the banner. I understand that the banner design cannot be altered for personal preference.

Criteria for nomination: The Honoree must be currently serving in the US Armed Forces and be a resident or an immediate family member of a permanent resident of Bullhead City, Ft. Mohave, Mohave Valley, Needles CA, or Laughlin NV. Immediate family member is considered spouse, child, grandchild, great grandchild, sister or brother/in-laws. Initial and annual verification of active duty status will be required.

Along with your completed and signed nomination form, please include a 5X7 FULL COLOR PHOTOGRAPH IN FORMAL MILITARY DRESS UNIFORM ONLY; OR FULL COLOR DIGITAL IMAGE IN JPEG FORMAT, MINIMUM 300 DPI, PROVIDED ON DISC (These will be returned after the banner installation)

Accepted Nominations will result in production of a banner and installation along Hwy 95 upon next scheduled install date (currently Memorial & Veterans Day)

Return form to Tri State Military Moms, Inc., PO Box 21694 , Bullhead City, AZ 86439
For further information, please call Cindy (928) 201-0319 or Beth (619) 992-5246

Deadline May 1st or October 1st for next installation

Submitted by _____ Date _____
(Your signature verifies that you have agreed to the above terms)



Sample Banner Above
Actual Banner 6' X 2.5'
Displayed on Hwy 95, BHC