

City of Claremont

Veterans Memorial Order Form



The Veterans Memorial Wall is dedicated to those who have served, who are currently serving and who will serve in the armed forces of our country. To honor or memorialize a veteran, please complete the form below. If more than one veteran is being honored, please fill out additional forms.

Name: _____

Address: _____

City/State/Zip Code: _____

Phone Number: _____

Please limit each line to 18 characters.

Name of Veteran:

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Rank and Branch of Service:

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Payment: \$50.00

Cash or Checks are acceptable forms of payment. All checks should be made payable to the **City of Claremont**.

- Cash
- Check _____

Received by: _____
Date: _____