

# SAINT JOHN THE APOSTLE PARISH VETERANS' WEEK

## DATA REQUEST FORM

**Why we are requesting this information:** Recently a committee of active and retired military veterans met to discuss ideas for Parish activities to honor and celebrate our veterans this coming November. We hope to identify all the veterans who are, or have been, members of our parish or are a relative of a Parish member. We wish to recognize the sacrifices made by all of our service members who are or have served honorably in the armed forces in peacetime and in war. Services will include: Army, Navy, Marine Corps, Air Force, Coast Guard, and Merchant Marines. The veteran may be living or deceased.

**Participation:** If you would like to assist with the Veterans' Day activities, please make a note on the form including the personal skills you could contribute to the planning effort.

<b>Person submitting information:</b> Name _____ Address: _____ Phone: _____ Email: _____	<b>I am interested in participating...(check or write in)</b> Attend the mass ____ Attend the social event ____ I would like to help organize ____ or set up ____ or plan ____. I have skill to contribute: _____
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<b>Name of Veteran:</b> _____ Relationship to submitter: _____ Branch of Service: _____ Rank: _____ Primary Mil. Specialty: _____ Living or deceased: _____ If living, address and phone: _____ Wartime experience: _____ _____ _____
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