



12159 S. Pulaski Rd.

Alsip, Il. 60803

708-597-2668

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HOMETOWN HEROES BANNER PROGRAM REGISTRATION FORM For Display in 2025 & 2026

Name of Veteran: _____

Branch of Military: _____

Name of Applicant: _____

Relationship of Applicant to Veteran: _____

Applicant Address: _____

Applicant Phone Number: _____ Applicant E-mail Address: _____

Would the applicant like the banner returned to them at the end of the two years?

Yes _____ No _____

Photo release acknowledgement (If applicable):

I hereby grant the Alsip Chamber of Commerce permission to use the attached photo in their Hometown Heroes Banner Program with the understanding that this photo or likeness may be used for the Chamber's promotional use. I assume all responsibility for providing accurate, true, and correct information regarding the veteran being honored.

Signature of applicant: _____

The fee for each banner is \$ 110.00 payable to the Alsip Chamber of Commerce.

This fee can be paid by check, or by calling the office for credit card payment.