

# Veterans Banner Project Application Form



Please return completed application form no later than October 23, 2024. Please print clearly. For FAQs, comments, or concerns please visit [www.taber.ca/veterans](http://www.taber.ca/veterans) or contact the Recreation Office at 403-223-5500 (5562).

Sponsor Name

Sponsor Address

Phone Number

Email

## Banner Information

Veteran's Name (as it will appear on the banner)

Branch of Military (Army, Air Force, etc.)

Era of Service (WWI, WWII, Korea, Afghanistan, peacekeeper, etc.)

Photo Attached? (please mark one)

|      |   |
|------|---|
| Yes: | No:   |
|      | *In the event of no photo, the banner will say "Lest We Forget" in the place of a photo |

Please note that a high-resolution photo may be sent digitally to us at [pool@taber.ca](mailto:pool@taber.ca)

Physical photos may be submitted with the application form. All physical photos shall be returned to the sponsor after they have been scanned. We will contact you when this is complete so you may retrieve your photo.

## Photo Release

I hereby grant permission for the use of the enclosed photo (or the photo I will provide digitally) and information about myself or my relative in the Veteran's Banner Project, without payment or consideration. I agree the sponsorship amount of **\$60.00** will allow the production of one (1) NEW banner with the above information, or **\$30.00** will allow for a re-hanging fee of an EXISTING banner.

Signature of Sponsor: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Living Veteran (if applicable): \_\_\_\_\_

Printed Name of Living Veteran: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application form to the Town of Taber Administration Building (A 4900 50<sup>th</sup> Street, Taber, AB, T1G 1T1) or by email to [pool@taber.ca](mailto:pool@taber.ca)

Disclaimer: Responsibility to provide accurate details regarding the veteran's name, service, photo, and other information lies solely with the submitter and/or sponsor and the Town of Taber accepts no liability or responsibility for inaccurate or false information. FOIP Note: The personal information on this form is being collected to support the administrative requirements authorized under Section 33 (c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact the FOIP Coordinator at 403-223-5519.