

## Veteran's Wall

Please fill in the block with the letters **EXACTLY** as you would like to see your brick.

**15 Spaces maximum** Leave a **Space** between words.

### ENGRAVING OF THE BRICK WILL COST 45 DOLLARS

1st Line

Service man's/woman's name

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2nd Line

Branch of Service

(Example: Army, Nav, Air Force, Army Air Corps, Marines, etc.)

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3rd Line

Years of Military Service

(Example: 1944-1946)

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Was this Veteran killed in Action? \_\_\_\_\_

Was this Veteran a POW? \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone # of contact person: \_\_\_\_\_

Address of contact person: \_\_\_\_\_

Please make your check out of S-E Student Council, Check # \_\_\_\_\_

Please return this form and your check to S-E Student Council

P.O. Box 130

Earth, TX 79031

**Thank You**