

City of Clinton Veteran Banner Program

Please print legibly.

Rank and full name of veteran in photo:

Branch of Service

Choose one: Era or the years of service:

Name of person submitting photo/info:

Phone number:

Address:

E- Mail address:

Relationship to veteran

PHOTO RELEASE FORM

I hereby grant City of Clinton Veterans Banner Committee permission to use the attached photo (which includes a likeness of me, my relative, or person being sponsored) in the City of Clinton Veteran Banner Program without payment or other consideration.

Signature of person submitting photo/info

Date

Printed Name

REMINDER: (1) Complete order form, (2) Email high-resolution quality photo of veteran in uniform to visitorcenter@clintonms.org, (3) Make payment of \$200.00 cash or check payable to: City of Clinton (4) Submit order form in person to Clinton Visitor Center, 1300 Pinehaven Road, Clinton, MS. For questions please contact Marsha Barham by calling 601.924.2221 or email visitorcenter@clintonms.org.