Honor Guard Request Form

Type of Event:			_ Indoor / Outdoor
Name/Rank of Individua	al:		
Location:	Address:		
Date:	Day of the Week:	Time:_	
Requesting Organization	n: Name:		(actual start time of event) Phone:
Fax:	-		
Honors Requested: (please circle)	Post & Retire Colors	Post Only	Flag Fold*
	Present Colors		
changes, I will contact the Honor Guard	on I have provided above is accurate to the be Manager @ (540) 665-5618. **FOR HONOR GUARD US		re are any
TEAM COMPOSITION			
1. Right Axe:			Showtime:
2. US Flag:			Distance:
3. VA Flag:			Time Length:
4. Left Pike:			
5. Narrator:			
Commander Signature:			
Team Return Time:			
Fax Sent:			
Fax Returned:			
Signature of HG Recipient:	Received by:		