



Nevada Veterans Giveaway Event

NAME (Please Print): _____

SEX: M / F AGE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BEST CONTACT PHONES: _____

BRANCH OF SERVICE: _____ SERVICE MOS/AFSC: _____

My Priority Needs up to \$1000 are: (Please list needed furniture or home goods)

1.) _____

2.) _____

3.) _____

4.) _____

5.) _____

I promise that the merchandise I receive will be used by me and/or my family, and I will not sell any of the goods that I receive. Once I am approved, I will need to provide some proof of service (i.e. copy of DD214, VA card, or other form of veteran or military identification).

I also understand and accept that by completing this form, and submitting this form, CityServe and the sponsoring organizations will do their best to obtain the requested items, but they do not guarantee performance. If I do not receive all of the requested items, I hereby waive any and all legal rights against all parties that will attempt to obtain the requested items for me and/or my family.

Signature

Date

Form Accepted By: Print Name

Date