



Franklin Square Civic Association Hometown Heroes Banner Application

BANNER SPONSOR INFORMATION - PLEASE PRINT CLEARLY AND LEGIBLY:

Banner Sponsor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: (please print) _____

BANNER CHOICE – SELECT ONE

- Hometown Hero (Hero lives/lived in Franklin Square) Hero dates of Franklin Square Residency _____
- Honored Hero (Sponsor lives in Franklin Square) Sponsor dates of Franklin Square Residency _____
- Re-hang existing Hometown Hero banner for two years (**the coordinator will contact you – \$10 donation suggested for re-hanging**)

HOMETOWN HERO CATEGORY – SELECT ONE

- | | | |
|--|--|--|
| <input type="checkbox"/> Army | <input type="checkbox"/> Police Department | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Navy | <input type="checkbox"/> Fire Department | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Air Force | <input type="checkbox"/> EMT | <input type="checkbox"/> Nurse Practitioner |
| <input type="checkbox"/> Marines | <input type="checkbox"/> Paramedic | <input type="checkbox"/> Physician Assistant |
| <input type="checkbox"/> Coast Guard | | |
| <input type="checkbox"/> Merchant Marine | | |

DONATION ONLY

Check this box if you do not have a specific hero to sponsor but would still like to contribute to the program. Any amount is appreciated.

Note: If you choose donation only, you do not have to fill out the rest of the form below.

HOMETOWN HERO INFORMATION – PLEASE PRINT CLEARLY AND LEGIBLY:

Exact name to appear on banner (Example: John D. Smith) _____

Years of Service (and War or Conflict if applicable) _____

Member of VFW Post 2718: Yes No Purple Heart Recipient: Yes No POW: Yes No

I, (banner sponsor name) _____, approve and authorize the use of my name and image, or my family member's name and image, on a Hometown or Honored Heroes banner, to be displayed in Franklin Square. I confirm that I, or my family member, meet the eligibility requirements.

Signature: _____ Date: _____

PLEASE SUBMIT ALONG WITH THE APPLICATION FORM:

- A high-resolution photograph of the honored individual in uniform where applicable. (minimum size photo 4"x6", maximum size 5"x7", portrait orientation).
- Check in the amount of \$135.00 payable to Franklin Square Civic Association (put Hometown Heroes in the memo line) – **Due by March 30, 2026 in order for the banner to be displayed in the Spring of 2026.**

Please mail the form with photograph and payment to: Hometown Heroes Banner Project, C/O Ileana Crane, 168 Harrison Avenue, Franklin Square, NY 11010. Please include a self-addressed, stamped envelope if you would like the photograph returned.

The application is not considered complete until application, photograph, and check have been received.

If you have additional questions, or need additional information, please email the FSCA Hometown Program Coordinator, Ileana Crane at hometownheroes@fsqcivic.org, or call (516) 326-2810

To Join the Franklin Square Civic Association, visit <https://fsqcivic.org/index.php/en/membership/join-fsca-online>