

**PERSHING PARK MEMORIAL ASSOCIATION, INC.**

LACLEDE, MISSOURI

[www.pershingmuseum.com](http://www.pershingmuseum.com)

**WALL OF HONOR INSCRIPTION**

(\$150.00 Donation required)

NAME \_\_\_\_\_  
First Middle Last Name

Name as you wish to have it engraved if different than above.

NAME \_\_\_\_\_

Which War: WWI \_\_\_\_\_ WWII \_\_\_\_\_ Korea \_\_\_\_\_ Vietnam \_\_\_\_\_  
Mexican Conflict \_\_\_\_\_ Philippine Conflict \_\_\_\_\_  
Panama \_\_\_\_\_ Persian Gulf \_\_\_\_\_  
Granada \_\_\_\_\_ Lebanon \_\_\_\_\_  
Middle East War: Iraq \_\_\_\_\_ Afghanistan \_\_\_\_\_  
More than one war \_\_\_\_\_

(If more than one war served, circle which war you would like to be engraved on)

We like to have for our files any information about this member of our armed forces that can be supplied; especially the grade/rank, service number, unit of assignment overseas, etc. If a person served in more than one war, please list which wars they were involved. Please attach any honorable document or photographs

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use back of page if more room is needed)

Name of donor:

\_\_\_\_\_

Address and phone of donor: \_\_\_\_\_

\_\_\_\_\_

(Correspondence with donors occurs periodically. We observe donor requests and acknowledge receipt of the contribution per name to be engraved.)

Please send your Wall of Honor Inscription request to:

**PERSHING PARK MEMORIAL ASSOCIATION, INC.**

**PO BOX 47**

**LACLEDE, MISSOURI 64651**