## **2024 Vietnam Veterans Day Commemoration Ceremony** Weyandt-Eddy Memorial Plaza, Goodfellow AFB, Friday, March 29, 2024.

Also, use this form to RSVP for the Thursday evening mixer and the Friday evening buffet dinner.

1.) Attendee Name *	
First MI Last	
2 \ Branch of Comics or Company Name	2 \ Venue of Comice
2.) Branch of Service or Company Name	3.) Years of Service
	YYYY to YYYY
4 \ Panis/Cundo ou Title	
4.) Rank/Grade or Title	
5.) Mailing Address *	
5.) Hailing Address	
Street Address	
Street Address	
City	State / Province / Region
,	
Postal / Zip Code	
6.) Phone *	7.) Email *
### ### ####	
8.) Is anyone in your party an EC-47 program	9.) Total Number attending the FREE THURSDAY
(aircrew or ground support) veteran?	EVENING MIXER 4-8 PM AT THE CLARION HOTEL? *
O Yes - TEWS	
O Yes - USAFSS	Include yourself in this number. If none, enter a zero.
O No	include yourself in this number. If none, enter a zero.
10.) Total Number attending the FREE FRIDAY	11.) Total Number attending the FRIDAY EVENING
MORNING COMMEMORATION CEREMONY &	RECEPTION AND DINNER AT THE CLARION HOTEL @
RECEPTION AFTERWARDS AT GOODFELLOW AFB? *	\$25.00 PER PERSON? *
Include yourself in this number. If none, enter a zero.	If none, enter a zero. Include yourself in this number. Make
	and mail payment to: Heritage Chapter-FTVA, P.O. Box 2469, San Angelo, TX 76902. FMI: Wayne @ 325 262-2641
	2403, 3dil Aligelo, 1X 70302. This. Wayne @ 323 202 2041
12.) If you purchased a Weyandt-Eddy Memorial Plan	za paver, please enter the paver size and location number
or engraved plate name here.	
	RENT VALID DEPARTMENT OF DEFENSE PICTURE ID CARD
pass? *	TENDEE. Do you or anyone in your party need a base
○ Yes	
O No	

If yes, please enter the Base Access List identifying information for each attendee needing a pass in Block 14 below.

14.) Base Access List: Full name, date of birth, last 4 digits of SSAN, Driver License Number and State of Issue.
Enter the full name, date of birth, last 4-digits of social security number, driver's license number and state of issue for each attendee 16 years old and older. Ages 14-16 require school ID. Under age 14 attendees must be with a parent or guardian.
15.) Name tags - Enter the First & Last name of each attendee. *
Name tags will be available at check-in for the Thursday evening reception and the Friday events.
16.) Are you or is anyone in your party a military veteran who served on active duty between 1 November 1955 and 15 May 1975 and have not been presented a Vietnam War Commemorative lapel pin? *  ○ Yes  ○ No
If yes, please submit an online Vietnam War Commemorative Lapel Pin Registration form for each veteran at: https://www.vietnam50thcpp.com/vietnam-veteran-lapel-pin
17.) Are you or is anyone in your party an immediate family member (i.e., parents, spouses, siblings, children) of a veteran who is listed on the Vietnam Veterans Memorial in Washington, D.C.? *  O Yes - Have received Gold Star lapel pin & certificate
<ul><li>○ Yes - Have not been presented the Gold Star lapel pin &amp; certificate</li><li>○ No</li></ul>
If yes and you have not been presented with this Gold Star lapel pin and certificate, please submit an online registration form. A program representative will also contact you for more information, if needed. https://www.vietnam50thcpp.com/inmemory-of
18.) Are you or is anyone in your party a surviving spouse at the time of death of a military veteran who served on active duty between 1 November 1955 and 15 May 1975 and have not been presented a Vietnam War deceased Vietnam veteran surviving spouse (DVVSS) Certificate of Honor and commemorative lapel pin? *
O Yes - Have received Blue Star lapel pin & certificate
<ul><li>○ Yes - Have not been presented the Blue Star lapel pin &amp; certificate.</li><li>○ No</li></ul>
If yes and you have not been presented with the Blue Star lapel pin and certificate, please submit an online registration form. A program representative will also contact you for more information if needed. https://www.vietnam50thcpp.com/vietnam-veteran-surviving-spouse
19.) Special needs / Comments
Do you or does anyone in your party need a wheelchair, walker, oxygen or other special assistance while attending any of these events? Please clarify in this block.
Thank you for this RSVP. Please contact us if you have questions or just want more information.

If you are using the mail-in RSVP Form, please complete all sections and send with any payment due to:

The Heritage Chapter-FTVA P.O. Box 2469 San Angelo, TX 76902