

# Hearts For The Heroes

Supporting Our Heroes And Their Families

## SERVICE MEMBER INFORMATION

Service Member's Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Marital Status (underline one): SINGLE / MARRIED / DIVORCED / SEPERATED / WIDOWED

Number Of Children: \_\_\_\_\_ Email Address: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M / F

Home Street Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## MILITARY INFORMATION

If Deployed Unit, Deployed With: \_\_\_\_\_ Date Of Deployment: \_\_\_\_\_

Military Branch: \_\_\_\_\_ Military Unit: \_\_\_\_\_ Active Duty: YES / NO

VA or Unit Contact: \_\_\_\_\_ VA or Unit Phone: \_\_\_\_\_

Description Of Help Needed:

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Amount Of Funds Needed: \_\_\_\_\_

Other Agencies or Foundation That Have Been Notified And/Or Assistance Received From:

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Are You In Need Of Finding Employment? If So, Would You Like To Be Referred To An Agency That Can Help With This Need? YES / NO

Name Of Relative Or Case Manager: \_\_\_\_\_ Relationship To Service Member: \_\_\_\_\_

Member Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Disclaimer: On my behalf and behalf of my dependents, I fully and forever release, discharge, and hold harmless HFH/BCH and it's directors, officers, employees, and advisers of and from any and all claims, demands, actions, causes of actions, suits, controversies, liabilities of every kind and nature accruing to me and my dependents arising directly and indirectly from or on account of the activities and assistance of Hearts For The Heroes.

Applicants Signature: \_\_\_\_\_

**Before a application can be decided on and action can be taken by Hearts For The Heroes, we will need this application and the following documents faxed or emailed back to our office:**

**If Service Member IS Retired:**

**A copy of the Service Member's DD-214 showing an honorable discharge.**

**If Service Member Is Active Duty:**

**A copy of the Service Member's most current LES.**

**Hearts For Heroes pays the vendors directly whenever possible, so copies of any bills that are part of the service request must be faxed or emailed to our office. When all of the requested paperwork has arrived at our headquarters a decision will be made as quickly as possible depending on available funds at the time of the request.**

*The Information herein is intended only for the person or entity to which it is addressed and contains confidential, proprietary, and/or privileged material. Any review, retransmission, dissemination or other use of or taking or any action in reliance upon this information by persons or entities other than the intended recipient is prohibited.*