

FirstName:

Please remit application and payment to 41 S. Columbus Avenue Littlestown, PA 17340

Courtney Conrad: (717) 359-5101 ext. 340

Email pictures to: assistant@littlestownboro.org THE BOROUGH OF LITTLESTOWN

Credit Card

Cash

Hometown Emergency Service Hero Banners

30"x 60"

Emergency Service Hero Banners are displayed for one year, after that year they are returned to the sponsor. To apply to the program, please complete the application below. Please attach a picture with application

Application and Payment Deadline: June 16th, 2025, at 4:15pm <u>NO</u> EXCEPTIONS

Payment Type: Check:_



			
Last Name:			
Title:	(Officer, Doc	(Officer, Doctor, Nurse, EMT, Firefighter)	
Service Information:			
Officer Banner	Firefighter Banner	Medical Banner	
Banner Price: \$140.00	check, credit card (third party fe	ee applies), and cash accepted	
Sponsor Name/Family (displayed on banner)			
Contact Name for pick up			
Contact Number			
If any of the above information cl	hanges, you are responsible for not picked up at the bord	ifying Courtney at the Borough Office. All banners must be ugh office.	
First come first serve	e in the order in which we red	eive both the application AND payment.	
}	Service Banner Program rur	s August to August	
NOTICE: THE BOROUGH IS NO	OT RESPONSIBLE FOR ANY DAM	AGES TO THE BANNERS WHILE BEING DISPLAYED.	
WE DO NOT TAKE LOCATION REQUESTS			
Signature:			
Borough Use only: Payment	/Application received:		