



MINOOKA COMMUNITY HIGH SCHOOL DISTRICT #111

Pledge of Allegiance Dedication Request

Date: _____

Name of person making request: _____

Please answer the following questions regarding the person to whom you would like the Pledge of Allegiance dedicated:

1. Name/Rank and Branch of Service:

2. Approximately date served in the military:

3. Did he or she serve in any conflict (check appropriate box)? Yes No

4. Is he or she alive or deceased? Please provide any details you feel comfortable sharing.

5. How do you know this person?

6. May we contact him or her with a card or letter thanking him or her for his or her service?

Yes No

If yes, please include his or her address. If not, please include your address

Please return this form to:
Minooka Community High School - South Campus
c/o Ms. Marci Jordan
26655 W. Eames St.
Channahon, IL 60410

*Thank you for helping Minooka Community High School honor the servicemen
and servicewomen who protect our freedom and our country each day.*