



## McConnell Air Force Base Honor Guard

### Military Honors Request Form

Office Phone: (316) 759-3991 / Cell: (316) 641-3724

Email: 22ARW.HG.HonorGuard@us.af.mil

Fax: (316) 759-1498

#### INSTRUCTIONS

Email or fax a copy of the request form, with member's DD Form 214 and/or military documentation.

**Only when you have received VERBAL CONFIRMATION from the McConnell AFB Honor Guard Office, is when the request is deemed complete and official.**

#### SECTION I. FUNERAL DIRECTOR OR REQUESTER INFORMATION

1. NAME (Last, First)	2. FUNERAL HOME	3. ADDRESS (City, State, Zip Code)
4. PHONE NUMBER	5. FAX NUMBER (if applicable)	6. TODAY'S DATE & TIME

#### SECTION II. DECEASED INFORMATION

1. NAME (Last, First MI.)	2. RANK/PAY GRADE	3. SOCIAL SECURITY NUMBER
4. MILITARY STATUS	5. BRANCH OF SERVICE	
<input type="checkbox"/> ACTIVE DUTY <input type="checkbox"/> RETIRED <input type="checkbox"/> VETERAN	<input type="checkbox"/> USAF <input type="checkbox"/> AAC <input type="checkbox"/> AAF <input type="checkbox"/> OTHER	

#### SECTION III. NEXT OF KIN INFORMATION

1. NAME (Last, First MI.)	2. RELATIONSHIP TO DECEASED
3. PHONE NUMBER	4. ADDRESS (City, State, Zip Code)

#### SECTION IV. MILITARY FUNERAL HONORS INFORMATION

1. SERVICE DATE	2. SERVICE START TIME	3. CEMETERY OR LOCATION NAME
4. TIME OF MILITARY HONORS	5. ADDRESS (City, State, Zip Code)	6. COUNTY
7. SERVICES REQUESTED		
<b>VETERAN</b> <input type="checkbox"/> FLAG FOLD <input type="checkbox"/> TAPS	<b>RETIREE</b> <input type="checkbox"/> FIRING PARTY <input type="checkbox"/> PALLBEARERS	<input type="checkbox"/> FLAG FOLD (will flag be provided) <u>YES</u> <input type="checkbox"/> TAPS
8. MILITARY HONORS VENUE	9. TYPE OF FUNERAL	10. OTHER ORGANIZATIONS PRESENT
<input type="checkbox"/> CHURCH/CHAPEL <input type="checkbox"/> GRAVESIDE	<input type="checkbox"/> CASKET <input type="checkbox"/> CREMATION	<input type="checkbox"/> VFW <input type="checkbox"/> AMERICAN LEGION <input type="checkbox"/> NONE <input type="checkbox"/> OTHER: _____

#### SECTION V. SPECIAL INSTRUCTIONS OR NOTES

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**MAFB HG USE ONLY:**

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S: \_\_\_\_\_

Initial/Date & Time: \_\_\_\_\_

D: \_\_\_\_\_

Attempt 1: \_\_\_\_\_

A: \_\_\_\_\_

Attempt 2: \_\_\_\_\_