

## Referral Form

Please fill out this form as completely as possible. It will ensure your HERO's needs are fulfilled to the best of our ability. Thanks so very much!!!

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RETURN DATE: \_\_\_\_\_

(This is so important to ensure this HERO receives **all** our packages!)

Location: (Iraq, Afghanistan or other) \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Military Service \_\_\_\_\_

Your name: \_\_\_\_\_

Your e-mail: \_\_\_\_\_

Your cell or home phone: (    ) \_\_\_\_\_

Does this HERO have access to (put an X on the line if they have this):

\_\_\_ Chow Hall

\_\_\_ Microwave

\_\_\_ Laundry Facility

\_\_\_ Coffee Machine

\_\_\_ PX

Is there any information that you can give us that would help in our support? (i.e., gets absolutely no support; a church is helping; located in a remote site; will be out on missions and away from the chow hall etc.) \_\_\_\_\_

\_\_\_\_\_

Do you know of any special snack or treat that this HERO particularly likes? (If we have that item, we will make sure it is included in the boxes we send.)

\_\_\_\_\_

\_\_\_\_\_

Return to: Nancy Aubel, BSM Miami Valley #3, P.O. Box 292722, Dayton, OH 45429

Email: [DaytonESOL@woh.rr.com](mailto:DaytonESOL@woh.rr.com)

Cell phone: (937) 830-3053