

Cannon AFB Honor Guard Request Form

Date/Time of Request: ____ / ____ / ____

Please complete all pertinent information below.

Contact information: email: 27sofss.fsoh.honorguard@us.af.mil Office: (575)784-6996 / 24/7 Contact: (575) 825-9830

Request for Military Funeral Honors

Requester Information

Name: _____ Relationship to Deceased: _____ Phone #: _____ Funeral Home: _____
Funeral Home Address: _____ Flag Provided by: _____

Funeral Details

Date/Time of service: ____ / ____ City/State: _____ County: _____ Street Address: _____ Zip: _____
Gravesite _____ Chapel _____ Internment _____ Memorial _____

Deceased Information

Rank/Name of Deceased: _____ SSN: ____ - ____ - ____ Service: _____ Veteran (<20 yrs) Retiree(20+ yrs)
DD214/Verified discharge status (Y/N): _____ Casket _____ Urn _____ Vault/Lid _____

Next of Kin Information

Name: _____ Relationship to Deceased: _____ Street Address: _____ City/State: _____
Phone #: _____

Additional Information:

Secondary Requests (Change of Commands, Parades, etc.)

Function Type: CoC, Retirement, Promotion, etc. Function Name: Example: 9/11 Remembrance Date/Time of Event: ____ / ____ / ____
Location/Address: _____ POC Name/Ph. #: _____ / _____
 Present Colors Post Colors Flag Fold Script Reader POW/MIA Parade Other: _____
(If Applicable) Honoree's Name/Unit: _____ / _____ # of years served: ____ Indoors Outdoors
Additional Information/Misc. Requests: _____

Completed by Cannon AFB Honor Guard members

Showtime at HG: ____ Depart from HG: ____ Showtime at the Event: ____ Actual Start Time: ____
Hours: ____ Miles Traveled (1-way): ____ Post Detail Checklist Completed?
Detail NCOIC: _____

Guardsmen: _____ Guardsman: _____ Guardsman: _____ Guardsman: _____

Guardsmen: _____ Guardsman: _____ Guardsman: _____ Guardsman: _____

Hot Wash: _____

