

**HUDSON VALLEY WOOD CARVERS
EAGLE CANES for VETERANS
NY STATE POST 9/11
IRAQ/AFGHANISTAN VETERANS
With COMBAT INJURIES**

Please print clearly

RANK / TITLE & NAME: _____

SERVICE BRANCH: _____

UNIT/DIVISION: _____

DATE OF INJURY: _____

PLACE / COUNTRY OF INJURY: _____

HOME TOWN & STATE : _____

SPECIAL REQUESTS (in order of appearance):

(1) _____ (2) _____ (3) _____

(4) _____ (5) _____ (6) _____

Use back of form to add more.

Contact Pat Paraggio at 845-489-0762 or pparaggio@optonline.net if you have any questions.

RECIPIENT'S CURRENT LOCATION

HOSPITAL: _____

HOSPITAL RM: _____ **CELL #** _____

CONTACT NAME: _____

PHONE #: _____

EMAIL: _____

HOME ADDRESS/CONTACT (if different than above)

ADDRESS: _____

CITY, STATE, ZIP _____

CONTACT NAME : _____

PHONE #: _____

EMAIL: _____

Mail completed form to: Pat Paraggio, 5 Johnson Rd. Lagrangeville, NY 12540