



Name of Entrant/Nominee: _____

Street Address: _____

City, State, ZIP: _____

Phone number: _____

Name of Family Member Deployed: _____

Relationship to Deployed: _____

Military Branch: _____

PLEASE NOTE THAN ANYONE RETURNING FROM DEPLOYMENT BEFORE JANUARY 1, 2016 IS NOT ELIGIBLE TO RECEIVE AN AWARD AS OUR GOAL IS TO HELP IMPROVE THE HOLIDAYS FOR FAMILIES WHO HAVE A DEPLOYED FAMILY MEMBER DURING THE HOLIDAY SEASON.

Submit one paragraph (300 words or less) explaining how a \$500 gift from Townsquare Cares would be used by your family to help make your holiday season merrier!!

Submitted by _____

Phone number: _____

Relationship to Entrant: _____

Radio station/Town you are submitting your application to: (ex. El Paso – KLAQ 95.5) _____

See Giveaway Official Rules for details. Winners will be required to sign a release of liability.