Vietnam War Veteran Lapel Pin – Application Form

Congressman Ben McAdams would like to recognize all Vietnam War veterans in Utah’s 4th Congressional District for their service and sacrifice.

The Vietnam War Commemoration is part of an ongoing national effort to honor all individuals who were on active duty in the United States Armed Forces between November 1, 1955 and May 15, 1975, regardless of their location of service. All veterans who meet these criteria are eligible to receive a Vietnam Veteran Lapel Pin. Pins can also be awarded to the surviving spouse of a deceased Vietnam War veteran.

If you are interested in receiving a Vietnam Veteran Lapel Pin, either in person from Congressman McAdams at a pinning ceremony or by having it mailed to you, please complete the following application.

Applications can be submitted by mail or email. For questions or assistance completing the application, please contact Christian.Mower@mail.house.gov or (801) 999-9801. For more information, please visit McAdams.house.gov/vietnam-war-veteran-pinning-ceremonies.

Please address emailed applications to Christian.Mower@mail.house.gov.

All mailed applications should be addressed to:

Congressman Ben McAdams  
ATTN: Christian Mower  
9067 S 1300 W, Suite 101  
West Jordan, UT 84088

Application continued on next page.
Would you like to participate in a Vietnam War Commemoration pinning ceremony?

□ Yes  □ No

If you would prefer to receive your pin by mail and not participate in a pinning ceremony, please check the box below and provide a mailing address.

□ I would prefer to receive my Vietnam Veteran Lapel Pin by mail

Mailing Address ______________________________________________________________

City ___________________________ State ___________________________

ZIP Code ___________________ Country _______________________________

Regardless of how you would prefer to receive your Vietnam Veteran Lapel Pin, all must complete the following sections of the application.

1. Veteran’s Information

First name: ________________________________________________________________

Middle name: ____________________________________________________________

Last name: _______________________________________________________________

Birth Date (Day, Month, Year): ________________________________

Phone Number: ___________________________________________________________

Mailing Address: __________________________________________________________

City: ___________________________ State: ___________________________

ZIP Code: ___________________ Country: _______________________________
2. Veteran’s Service Information

Branch of Military Service: ________________________________

Date of Service Start (Day, Month, Year): ______________________

Date of Service End (Day, Month, Year): ________________________

Locations of Service: _______________________________________

Any other information you would like our office to know about you or your service: __________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

3. Veteran’s Spouse Information

*If you are a surviving spouse of a deceased Vietnam War veteran and would like to receive a pin, please complete this section.*

If the veteran themselves is receiving the pin, please leave this section blank.

First name: ________________________________________________

Middle name: _____________________________________________

Last name: _______________________________________________

Relationship to Veteran: ________________________________
4. Applicant Signature

1. I release this information to the Office of Congressman Ben McAdams for use in the Vietnam War Commemoration. I authorize Congressman McAdams to release my name and photo in all materials such as social media, website, e-newsletter, etc.

2. I am a legal resident of the State of Utah.

Signature: ___________________________________________  Date: __________________

Printed Name: _____________________________________________________________