



PATRICK SPACE FORCE BASE MILITARY FUNERAL HONOR REQUEST

Office Hours of Operations: Mon – Fri/ 7:30 AM to 4:30 PM
Office: (321) 494-7477/7478 **After Hours/On-Call:** (321) 616-5937
Email: patrickhonorguard@us.af.mil **Fax:** (321) 494-1357
Address: Building 1391, Marina Road, Patrick AFB, FL 32925



Please visit our website for request forms and pertinent Honor Guard Information; www.gopatrickfl.com/honor-guard.html

Part I FUNERAL HONORS REQUEST INFORMATION					
REQUESTOR INFORMATION					
Funeral Home/Requestor Name		Funeral Director Name		Phone Number	Fax Number
Address		City		State	Zip Code
DECEASED INFORMATION					
Name (Last, First M.)		Grade	Social Security Number		
Service Branch <input type="checkbox"/> Regular Air/Space Force <input type="checkbox"/> Air Force Reserves <input type="checkbox"/> Air National Guard <input type="checkbox"/> Army Air Corps <input type="checkbox"/> Army AF <input type="checkbox"/> Other: _____					
Military Status Services Requested Note: These are requested honors. Approval is subject to service verification through DEERs and Honor Guard manning.					
<input type="checkbox"/> Veteran Honors:		<input type="checkbox"/> Flag Fold <input type="checkbox"/> Taps			
<input type="checkbox"/> Retiree Honors:		<input type="checkbox"/> Flag Fold <input type="checkbox"/> Taps <input type="checkbox"/> Firing Party <input type="checkbox"/> Pallbearing			
<input type="checkbox"/> Active Duty Honors:		<input type="checkbox"/> Flag Fold <input type="checkbox"/> Taps <input type="checkbox"/> Firing Party <input type="checkbox"/> Pallbearing <input type="checkbox"/> Color Guard			
NEXT OF KIN INFORMATION					
Name (Last, First M.)		Phone Number		Relationship to Deceased	
Address		City	State	Zip Code	<input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Caretaker <input type="checkbox"/> Other: _____
FUNERAL HONORS LOCATION INFORMATION					
Location Name		Point of Contact		Phone Number	
Location Address		City		State	Zip Code
Honors Date	Estimated Honors Start Time	Location Type <input type="checkbox"/> National Cemetery <input type="checkbox"/> Private Cemetery <input type="checkbox"/> Church <input type="checkbox"/> Funeral Home Chapel <input type="checkbox"/> Other: _____			
Remains: <input type="checkbox"/> Casket <input type="checkbox"/> Urn <input type="checkbox"/> No Casket or Urn <input type="checkbox"/> Caisson		FLAG MUST BE PROVIDED BY <input type="checkbox"/> FUNERAL DIRECTOR OR <input type="checkbox"/> FAMILY Take member's DD-214 and death certificate to local Post Office to obtain a flag.			
Additional Notes or Family Requests:					

Part II REQUESTING INSTRUCTIONS/INFORMATION			
<input type="checkbox"/> Please provide the Patrick SFB Honor Guard with at least 1 week's notice prior to the requested honors, when possible.			
<input type="checkbox"/> Provide a copy of the deceased member's DD214 or equivalent service document for verification.			
<input type="checkbox"/> Please call our office to confirm receipt of this request.			
<input type="checkbox"/> Please call after hours phone if honors request is within 48 hours and you have not received confirmation.			
Submission of this form does not guarantee honors will be provided. You must receive confirmation the Honor Guard can perform.			
If service is not USSF, USAF, Army Air Corps, or Army AF, please contact the appropriate servicing Honor Guard			
US Army (571) 801-3345 (800) 557-7408	US Marine Corps (866) 826-3628	US Navy (904) 542-1536 (904) 542-4876	US Coast Guard (786) 367-6822
MacDill AFB: (813) 828-5190	After Hours: (813) 833-4746	Moody AFB: (229) 257-4142	After Hours: (229) 563-7707
Thank You Cards/Letters: If the family would like to send thank you cards or letters to the Honor Guard, please mail to: "Patrick Space Force Base Honor Guard" 620 O'Malley Drive BLDG 537, Patrick SFB, FL 32925			

Travel Distance: _____ miles		Administrative Use Only				Travel Time: _____ hrs: _____ mins	
<input type="checkbox"/> Board	Int:	DEERs/Cas. Affairs:	Date: _____	Time _____	Mil. Stat _____ Spoke w/ _____	Int:	
<input type="checkbox"/> Detail Tracker	Int:	Fun. Dir. Requestor:	Date: _____	Time _____	Verified w/ _____	Int:	
<input type="checkbox"/> Cal Invite or Entry	Int:	Call team if w/in 24 hrs:	Date: _____	Time _____	Spoke w/ _____	Int:	
<input type="checkbox"/> Detail Packet or <input type="checkbox"/> Sent To HARB	Int:	<input type="checkbox"/> File original request	Int:	Notes:			