



Accession Number: 2024.3

Object Number: _____

World War II Photographs - Donation Form

Veteran's Name: _____

Branch of Service or Volunteer Organization: _____

Rank: _____ **Where Served/Unit:** _____

Awards: _____

Relationship to Benzie County: _____

Other Service Information / War Stories (attach additional information as needed):

Description of Photographs: _____

Your Contact Information:

Name: _____

Address: _____

Phone: _____ **Email:** _____

Your Relationship to Veteran: _____

Donor states that they have complete power and authority to donate the photographic images described above to the Benzie Area Historical Society (BAHS).

Donor further acknowledges that they have provided correct information to the best of their ability and gives the BAHS permission to use all photographic images and service information as they deem fit. BAHS has the right and authority to dispose of photos and images from the collection as per our Collections Policy.

Donor Signature: _____

Date: _____