

Massachusetts Army National Guard - Honor Guard

Attn: Military Funeral Honors, Fax: 339-202-0106 or Email: ng.ma.maarng.mbx.honor-guard-ma@mail.mil

MA Honor Guard Coordinator Work: 339-202-3177, Work Cell: 774-286-1915, 24 Hrs a day

Please fill out completely. Use the fillable form or print clearly**1. FUNERAL DIRECTOR/ POC or NOK :** _____ Phone: _____ - _____ - _____

Funeral Director Cell Phone: _____ - _____ - _____

Name of Funeral Home: _____

Address: _____ Zip: _____

Funeral Home Email Address: _____

2. DECEASED INFORMATION: CASKET: _____ URN: _____

Last, First, Middle Initial: _____ Rank: _____

SSN: _____ - _____ - _____ Retired Army: _____ Army Vet: _____ Other Branch: _____

Service From: _____ to: _____ Date of Birth: _____ Religion: _____

Was the deceased a member of a Veteran Service Organization? Name: _____

Attach proof of service (DD214). Call immediately with difficulties obtaining the DD214.**3. NEXT OF KIN INFORMATION: (To whom will the flag be presented.)**

Name: _____ Relationship: _____ Phone: _____

Address: _____

4. SERVICE LOCATION: Mark one with an "X"

Please be accurate with locations of the service and the time honors are expected to be rendered. If times change prior to the service or are delayed on the day of the service please contact us immediately.

Funeral Home: _____ Church: _____ Cemetery: _____ Other: _____
Day Date Month Year

Day & Date you are requesting the Honor Guard: _____ - _____ - _____

Time of Church Service: _____ Time of Interment: _____

Church or Cemetery Name and Address: _____

City: _____ Church or Cemetery Phone # _____

Cemetery Street, Section & Row: _____

HONORS TO BE PRESENTED: Playing of Taps, Flag Folding and Flag Presentation.

Do you have an interment Flag Available? Yes _____ No _____

Funeral Directors may obtain a US Interment Flag from the local VA Office or Post Office.**PLEASE ALLOW A MINIMUM OF 48 HOURS NOTICE****Please FAX or Email this Form along with a DD214**