

**Application for Memorial Medallion DRT/CRT**

**Please include a copy of DRT/CRT application as proof with this form.**

*Please print the following information and mail or fax/e-mail completed application with the necessary documents*

To: 4<sup>th</sup> Vice President General Tammie Smith, P.O. Box 849, McCamey, TX 79752, 432-652-3105

[drttammie@gmail.com](mailto:drttammie@gmail.com)

Enclose check payable to DRT Inc for \$59.54 (\$55+ \$4.54 sales tax) Check # \_\_\_\_\_ Payments by credit card will be accepted by calling DRT Headquarters (512)-339-1997

\_\_ Visa \_\_ M/C \_\_ Discover (Payment must be received before medallions will be shipped)

\_\_ DRT \_\_ 3" \_\_ 4 3/4" \_\_ CRT

**Please send marker to:**

\_\_\_\_\_  
Name & Address

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
A/C Telephone #

\_\_\_\_\_  
e-mail address

**Medallion is for:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
If member is deceased, date of death

\_\_\_\_\_  
DRT/CRT # and chapter name

\_\_\_\_\_  
Name and location of cemetery where medallion will be placed.

\_\_\_\_ Family Member \_\_ Cemetery Official

**REQUIRED:** *Signature of person granting permission to place medallion.*

Applicant is \_\_ DRT \_\_ CRT \_\_ Family \_\_ Other

\_\_\_\_\_  
Applicant's Name & Address

\_\_\_\_\_  
City/State/ Zip Code

\_\_\_\_\_  
A/C & Telephone #

\_\_\_\_\_  
e-mail address

\_\_\_\_\_  
Chapter and DRT/CRT membership number if applicable.

\_\_\_\_\_  
Relationship to (DRT/CRT member)

If applicant is not a DRT/CRT member.

\_\_\_\_\_  
Name of sponsor

\_\_\_\_\_  
chapter

\_\_\_\_\_  
membership #

*If a medallion is requested by a chapter to give to a deceased members family at the time of members death. Chapter Treasurer shall order medallion from 4<sup>th</sup> Vice President General with explanatory note. When medallion is place the chapter shall give the following information concerning placement of the medallion to 4<sup>th</sup> Vice President General: name of deceased; membership number; date of death; cemetery and city.*

\_\_\_\_\_  
Approved by 4<sup>th</sup> Vice President General

\_\_\_\_\_  
Date of approval