

Choose how you will participate in the national recognition journey. There is also a free way to add your voice to the mission. This routing form does not itself complete a nomination, reservation, or partnership.

1 | HOW WOULD YOU LIKE TO PARTICIPATE? (SELECT ONE)

☐ **TEEN CAREGIVERS — NOMINATE / REGISTER / RSVP**

For a teen caregiver, parent/guardian, or nominator. Youth plus one authorized adult attend at no cost upon confirmation.

☐ **THE UNSEEN AMONG US™ — NOMINATE / REGISTER / RSVP**

For Young People of Promise, their authorized adults, and nominators. Privacy-conscious participation; no placement or case details requested.

☐ **AMERICA, PULL UP A CHAIR.™ — SUPPORT**

Attend ($150 per seat), reserve a 10-seat supporter table ($1,500), contribute from afar (suggested $150), or request a resource table ($300).

☐ **NATIONAL PARTNERS — SPONSOR / PARTNER**

For businesses, foundations, nonprofits, agencies, and organizations interested in one or more cities or national participation.

☐ ADD YOUR NAME TO THE NATIONAL PROMISE™ — FREE SUPPORT

Join The National Promise Wall™ by sharing your support for the mission. No purchase, donation, or attendance required.

2 | CONTACT INFORMATION

Name of person completing form: _____

Email address: _____

Phone (optional): _____

Organization (if applicable): _____

3 | PREFERRED TOUR CITY (SELECT ONE; NATIONAL PARTNERS MAY SELECT MULTIPLE)

☐ Arlington, VA — Apr 17 ☐ San Antonio, TX — May 15 ☐ Killeen, TX — Jun 12

☐ El Paso, TX — Jul 17 ☐ Colorado Springs, CO — Aug 21 ☐ Tacoma, WA — Sep 18

☐ Clarksville, TN — Oct 16 ☐ Fayetteville, NC — Nov 6 ☐ Jacksonville, NC — Nov 13

☐ Augusta, GA — Dec 11 ☐ Multiple cities / Nationwide ☐ Undecided

All city recognition events: 11:00 AM–3:00 PM local time. City selection is a preference, not confirmation of attendance or availability.

OPTIONAL — NATIONAL PROMISE WALL™ (FOR FREE SUPPORTERS)

Name to display (or organization): _____

City / State (optional): _____ ☐ Display city/state ☐ Name only

Why I support this mission (optional, 1 sentence): _____

_____

☐ YES, I authorize public display of the name and optional message above on the official National Promise Wall™. ☐ NO, contact me privately; do not publish my details.

For anyone under 18, public recognition requires separate parent/guardian authorization. Messages may be moderated; no youth stories or private information should be submitted.

4 | WHAT HAPPENS NEXT

☐ Please send the applicable next-step form and instructions. ☐ Please contact me to discuss participation.

Additional note (optional): _____

_____

5 | ACKNOWLEDGMENT

☐ I understand this inquiry does not confirm an award, RSVP, reserved seat, sponsorship, or resource-table approval. Any applicable payment, adult authorization, youth assent, and optional media permission are handled in the appropriate follow-up form.

Signature (if printed): _____ Date: _____

RETURN / CONTACT

Military Child World Expo Foundation | 2461 Eisenhower Avenue, Alexandria, VA 22314 | 703-646-8410
info@themilitarychildworldexpo.com | Email subject: National Tour

Youth participation and media consent are separate. No sensitive caregiving, foster-care, health, or placement details are requested on this form.