

# Unit Shower Assistance Request



Operation Showers of Appreciation, Inc.  
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 92051

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[www.operationshowersofappreciation.org](http://www.operationshowersofappreciation.org)

Date:

## FRO/Command Representative

Name:

Position:

Duty Station:

Branch of Service:

Command:

Telephone:

Email Address:

Expected Date of Shower:

## Moms Participating in Shower

Sex of Baby	Mom and Dad's Name	Rank	Due Date

I understand that; by submitting this application I acknowledge that Operation Showers of Appreciation is not obligated to purchase or donate items for families within my command. I acknowledge that by receiving donations from OSOA, I will not attempt to resell or return any items donated to me without contacting an OSOA representative and all items donated will do to families within my command. I will provide Operation Showers of Appreciation, photos of our unit shower once the event has taken place. I certify that all information provided is true, correct and complete.

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 Signature and Date