



## Family Trauma Advocacy Program Reflection Wall

The Reflection Wall is a display of those who have lost their lives to a violent death.

The purpose of the Reflection Wall is to express that each person who died is not just a statistic or a face, but a person with a name, who has a family, as well as dreams and goals. The wall is a reflection of them so others can see who they were.

Please complete

### Family Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Number: \_\_\_\_\_ Evening: \_\_\_\_\_

Email: \_\_\_\_\_

### Deceased Information

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Cause of Death: \_\_\_\_\_

Write a short paragraph of no more than 150 words about your loved one:

---

---

---

---

Please note, to submit a photo, please download and complete the "Photo and Information Release Form." Additionally, an original photo can be submitted (no photocopies please) via:

Email: [ftaprogram@comcast.net](mailto:ftaprogram@comcast.net) (Please type "Reflection Wall" and loved one's name in the subject line)

Mail: P.O. Box 7025 Romeoville, IL 60446