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**Family Trauma Advocacy Program**

**Reflection Wall**

The Reflection Wall is a display of those who have lost their life 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:

Contact Number:      \_\_\_Email: \_

**Deceased Information**

Name: \_

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

Cause of Death: \_

Write a short paragraph no more than 150 words about your love 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 (Please type “Reflection Wall” and loved one’s name in the subject line)

**Mail:**

Family Trauma Advocacy Program

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