

ARE YOU A VETERAN? YES: _____ NO: _____ BRANCH OF SERVICE: _____

ARE YOU A VETERAN OF THE KOREAN WAR? _____ VIETNAM WAR? _____

1. How did you learn about the Honor Flight organization? _____

2. Why are you volunteering for Honor Flight? _____

3. Please list any prior volunteer experience: _____

4. Please list one (1) personal reference:

Name: _____ Relationship to applicant: _____

Address: _____ City/State/Zip: _____

E-Mail Address: _____

Phone Numbers: Day: _____ Evening: _____

5. Please list one (1) emergency contact:

Name: _____ Relationship to applicant: _____

Address: _____ City/State/Zip: _____

E-Mail Address: _____

Phone Numbers: Day: _____ Evening: _____

6. Are you requesting to travel with a specific veteran, if possible? Yes: _____ No: _____

If yes, please name the veteran and relationship: (Completed Veteran Application must be submitted also)

Veteran's Name: _____ Relationship _____

7. Are you able to push a veteran in a wheelchair up a slight incline? Yes: _____ No: _____

8. Can you lift and carry 100 pounds? Yes: _____ No: _____

9. Please identify any physical disabilities, restrictions and/or medical conditions that might limit your ability to fulfill the duties of a guardian. Also, please list any medications being taken and how often.

10. T-Shirt Size: (M, L, XL, XXL, XXXL) _____

11. Please note any medical experience and/or training you may have (e.g.: EMT, CPR, Paramedic, R.N., etc.)

12. Have you previously served as an Honor Flight Guardian? _____

When and where? _____

PLEASE REVIEW CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. As photographic and video equipment are frequently used to memorialize and document **Great River Honor Flight** trips and events, his/her image may appear in a public forum, such as the media or a website, to acknowledge, promote or advance the work of the **Great River Honor Flight** program. I hereby release the photographer and **Great River Honor Flight** from all claims and liability relating to said photographs. I hereby give permission for my images captured during **Great River Honor Flight** activities through video, photo, or other media, to be used solely for the purposes of **Great River Honor Flight** promotional material and publications, and waive any rights or compensation or ownership thereto.
2. I further state that medical insurance is the responsibility of the guardian and I understand that neither **Great River Honor Flight** nor the provider of aircraft ("Flight Provider") provides medical care. I understand that I accept all risks associated with travel and other Honor Flight activities and will not hold **Great River Honor Flight**, the Flight Provider, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of **Great River Honor Flight** responsible for any injuries incurred by me while participating in the Honor Flight program.
3. **I understand and agree that if approved as a Guardian, I MUST attend the mandatory pre-flight briefing for guardian training and MUST pay Great River Honor Flight for my flight tickets by the date of the pre-flight briefing. (cost is usually between \$300.00 and \$400.00)**

SIGNATURE: _____ DATE: ____/____/____

(E-mail applicants will be required to sign prior to actual trip date)

Please submit this application to: **Great River Honor Flight**
ATTN: Guardian Application
c/o WGEM TV
513 Hampshire
Quincy, Illinois 62301

Or e-mail to: honorflight@wgem.com

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