FOR HONOR FLIGHT USE ONLY LN: _____

VOLUNTEER APPLICATION

______ DR:_____/____

everything from office and clerical s and making the "Welcome Home I Volunteers play a significant role on such as this requires many	nt would not be successful without the dedicated heleupport to airport send-off and returns. i.e., Assisting Heroes" post flight arrival a great, memorable expevery trip, ensuring that every veteran has a safe a people willing to help. For more infor 2-6943 or visit www.oklahomawarriors.org.	og Veterans at the airport at preflight perience for the returning Veterans. nd memorable experience. A project
Name:		
Address:		
City:	State:	Zip:
Phone: (Day):	(Evening):	Cell:
Email:		
Occupation:	DOB:	Age:
	na Warriors Honor Flight? , please list the month/year of the flight:	
Why are you volunteering with C	oklahoma Warriors Honor Flight?	
Please list any prior volunteer e	xperience:	
We have several volunteer oppo	rtunities. Please indicate below all areas of in	terest to you:
 Administrative 	O Public Relations	
Fundraising	Trip Support	
O Guardian (Separate appl	ication required)	

PRIMARY EMERGENCY CONTACT INFORMATION: Name: _____ Relationship: _____ Address: ___ State: _____ Zip: _____ Phone: (Dav): ______ Cell: ______ PERSONAL REFERENCES (two): _____ Relationship: _____ Name: ___ Address: ___ City: _____ State: _____ Zip: _____ Phone: (Day): ______ Cell: _____ Name: ______ Relationship: _____ Address: ____ City: _____ State: _____ Zip: _____ Phone: (Day): _____ Cell: _____ PLEASE REVIEW CAREFULLY AND SIGN: The undersigned acknowledges and agrees that: 1. As photographic and video equipment are frequently used to memorialize and document 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 Oklahoma Warriors Honor Flight program. I hereby release the photographer and Oklahoma Warriors Honor Flight from all claims and liability relating to said photographs. I hereby give permission for my images captured during Honor Flight activities through video, photo, or other media, to be used solely for the purposes of Oklahoma Warriors 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 veteran and I understand that Oklahoma Warriors Honor Flight, the providers of air/ground transportation and housing services do not provide medical care. I understand that I accept all risks associated with travel and other Honor Flight activities and will not hold Oklahoma Warriors Honor Flight, the Flight Provider, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of the Honor Flight responsible for any injuries incurred by me while participating in the Honor Flight program. Date: _____

Please submit this COMPLETED form to: Oklahoma Warriors Honor Flight

Attn: Volunteer Application

P.O. Box 375 Colcord, OK 74338

or via email to: applications@oklahomawarriors.org

