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## GUARDIAN APPLICATION

The Oklahoma Warriors Honor Flight would not be successful without the generous support of our guardians. Guardians play a significant role on every trip, ensuring that every veteran has a safe and memorable experience. Guardians are responsible to physically assist the Veterans prior to flight, during flight and throughout the visits to the memorials. This is a LONG day! Guardians cannot be a spouse/significant other and must be between 18-70 years of age. Guardians are required to pay their expenses. The Guardian fee is \$500 and is non-refundable. Each Guardian is required to attend a mandatory training session to ensure the safety and success off the mission. Once you are confirmed on a flight, you will be notified of when and where to submit your payment. Family guardian applications MUST be received prior to Veteran notification, Oklahoma Warriors Honor Flight is a non-profit 501©3 organization and the guardian fee donation is tax-deductible. For further information, please contact Lana Hurt at 918-326-4622 or Wayne Perego at 918-864-9165 or visit www.oklahomawarriors.org

PRINT first, midd	lle and last na	ame as it appea	ars on your ID							
Address:										
City:	State:				Zip:					
PHONE: Day:	HONE: Day:			Evening:			Cell:			
E-Mail:							Dat	te of Birth:		
Occupation:										
Are you a veteran?		NO	If YES, please indicate BRAN			d WHEN	and WHE	RE you serv	ed:	
Gender (circle one):	М	F	Shirt Size (circle one):	S	M	L	XL	XXL	XXXL	
Please list any prior vol	unteer exp	erience:								
PRIMARY EMERGENO	CY CONTA	ACT INFORM	MATION:							
Name:			Relationship:							
Address:										
			State:							
PHONE: Day:			Evening:				Cell:			
PERSONAL REFEREN	ICE:									
Name:					Relations	ship:				
Address:										
			State:							
PHONE: Day:			Evening:				Cell:			

Are you requesting to travel with a specific Veteran? YES NO (please note: both Guardian and Veteran applications mus								
Are you able to push a Veteran in a wheelchair up a slight incline?	YES NO							
Can you lift 100 pounds? YES NO								
Please identify any physical disabilities, restrictions and/or medical c	conditions that may limit your ability to fulfill the duties of a guardian. Also, please list							
any medications being taken and how often.								
Do you have any food, drug or insect allergies? YES NO If Y	/ES, please list:							
Please note any medical experience you may have (e.g., EMT, CPR, Paramedic, Nursing, etc.):								
PLEASE REVIEW CAREFULLY AND SIGN:								
The undersigned acknowledges and agrees that:								
public forum, such as the media or a website, to acknowledge, promrelease the photographer and Oklahoma Warriors Honor Flight from	norialize and document Honor Flight trips and events, his/her image may appear in a ote or advance the work of the Oklahoma Warriors Honor Flight program. I hereby all claims and liability relating to said photographs. I hereby give permission for my or other media, to be used solely for the purposes of Oklahoma Warriors Honor compensation or ownership thereto.							
air/ground transportation and housing services do not provide medic Flight activities and will not hold Oklahoma Warriors Honor Flight, the	eteran and I understand that Oklahoma Warriors Honor Flight, the providers of sal care. I understand that I accept all risks associated with travel and other Honor e Flight Provider, or any person appearing or quoted in any advertisement or public sole for any injuries incurred by me while participating in the Honor Flight program.							
SIGNED:	DATE:							
Please submit this <b>COMPLETED</b> form to:	Oklahoma Warriors Honor Flight Attn: Guardian Application P.O. Box 375 Colcord, OK 74338							
or via email to:	applications@oklahomawarriors.org							

If you have any questions, please contact Lana Hurt at 918-326-4622 or Wayne Perego at 918-864-9165