

Veteran Application



Honor Flight Network recognizes American Veterans for your sacrifices and achievements by having you to Washington DC to see YOUR memorial at no cost. Top priority is given to WWII and terminally ill veterans from all wars. Honor Flight Network will be expanding to include Korean and Vietnam Veterans. For Honor Flight Network to achieve this goal, guardians fly with the Veterans on every flight providing assistance and helping Veterans have a safe, memorable and rewarding experience. For what you and your comrades have given to us, please consider this a small token of appreciation from all of us at Honor Flight Network. For further information, please contact us at 423.330.6189 or visit us at <http://www.honorflightnetn.org>.

YOUR NAME: _____ **NICK NAME:** _____

(Please List Your First, Middle & Last Name as it appears on your driver's license or government ID.) (If Applicable)

ADDRESS: _____ **GENDER:** M F

CITY: _____ **COUNTY:** _____ **STATE:** _____ **ZIP:** _____

PHONE: Day: _____ Evening: _____ Cell Phone: _____

E-MAIL ADDRESS: _____ **AGE:** _____ **DOB:** _____

HOW DID YOU HEAR ABOUT HONOR FLIGHT? _____

TEE SHIRT SIZE: (S, M, L, XL, XXL, XXXL) _____

PREFERRED DEPARTING AIRPORT: _____

ALTERNATE CONTACT (son, daughter, etc): NAME: _____

PHONE: _____ E-MAIL: _____ RELATIONSHIP: _____

EMERGENCY CONTACT INFORMATION (someone available the day you travel):

Name: _____ Relationship: _____

Address: _____

PHONE: Day: _____ Evening: _____ Mobile: _____

SERVICE HISTORY: BRANCH OF SERVICE: _____ RANK: _____

HOME TOWN (from which city and state did you enter the service?): _____

ACTIVITY DURING WWII: _____

MEDICAL: INFORMATION PROVIDED WILL NOT DISQUALIFY YOU. IT PERMITS US TO ASSESS THE SUPPORT WE NEED DURING THE TRIP. INFO IS FOR HONOR FLIGHT AND MEDICAL PERSONNEL ONLY.

Do you use mobility equipment? YES NO. If YES, please circle device: CANE WALKER WHEELCHAIR SCOOTER

MEDICATION	TAKEN HOW OFTEN?	MEDICATION	TAKEN HOW OFTEN?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE COMPLETE BACK PAGE