***HONOR FLIGHT USE ONLY; Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Received: \_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_Spec Req:\_\_\_\_\_\_\_\_***

***WATERLOO HONOR FLIGHT GUARDIAN APPLICATION***

Updated 07/14/2022

***The Sullivan-Hartogh-Davis, Cedar Valley 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 safeand memorable experience. Duties include, but are not limited to: physically assisting the veterans at the airport, during the flight and at the memorials. Guardians are also responsible for their own expenses (airline fare, etc.).

**GUARDIAN REQUIREMENTS:** Can be 18 years old and no older than 70 years of age

Must be in very good health

Must be willing to pay a $600.00 fee to serve in this capacity (paid at time of service)

Cannot have served as a guardian for an Honor Flight before

Cannot be a spouse of the veteran

Must supply copy of driver’s license or legal photo document with this application

Able to attend mandatory pre-flight meeting prior to day of flight

\* For an underage guardian to accompany a Veteran he/she must be, 16 or 17 years of age. A parent of the underage guardian and the underage guardian must both sign below and date.

PARENT Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT and GUARDIAN PRINTED NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Have you ever served as an Honor Flight Guardian before: \_\_\_\_\_Yes \_\_\_\_\_No

Are you requesting to travel with a specific veteran, if possible? \_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_ No.

If yes, name the veteran: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(If so, please submit your guardian application WITH the veteran application)*

**PERSONAL INFORMATION**: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Must be exact as it appears on your ID (for airline travel)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_

Phone: Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Night: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you a Veteran? \_\_\_\_\_\_ Yes \_\_\_\_\_\_ No

Tee Shirt Size: *(S, M, L, XL, XXL, XXXL)* \_\_\_\_\_\_\_\_ Date of Birth *(M/D/Y)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a veteran, please indicate BRANCH of service, and WHEN and WHERE you served: \_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ARE YOU CURRENTLY TRAINED AND LICENSED IN ANY OF THE FOLLOWING** (Please Check if “yes”):

MD\_\_\_\_\_\_\_ RN\_\_\_\_\_\_\_ LPN\_\_\_\_\_\_\_ EMT\_\_\_\_\_\_\_ PARAMDEIC\_\_\_\_\_\_\_

**PERSONAL REFERENCE**:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Numbers: Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**--PLEASE TURN OVER AND COMPLETE BACK SIDE OF APPLICATION--**

**EMERGENCY CONTACT DAY OF FLIGHT**:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Numbers: Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Can you lift 100 pounds?\_\_\_Yes\_\_\_No, push a wheel chair up a incline?.\_\_\_Yes\_\_\_No
* Please identify any physical disabilities, restrictions and/or medical conditions that would limit your ability to fulfill the duties of a guardian. Also, please list any medications being taken and how often. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PLEASE REVIEW CAREFULLY AND SIGN*:**

***(NOTE: Honor Flight refers to Honor Flight Network and Sullivan-Hartogh-Davis, Cedar Valley Honor Flight)***

The undersigned acknowledges and agrees that:

1. As photographic and video equipment are frequently used to memorialize and document **Honor Flight** trips and events, my image may appear in a public forum, such as – but not limited to—the media or a website, to acknowledge, promote, or advance the work of the **Honor Flight** program. I hereby release the photographer and **Honor Flight** from any and all claims and liability relating to said photographs. My signature below hereby grants permission for use of my image captured during **Honor Flight** activities through any form of media, to be used solely for the purposes of **Honor Flight** promotional material and publication. I waive any and all right of compensation or ownership thereto.

2. I further state that medical insurance is the responsibility of the Veteran, Volunteer, or Guardian and I understand that neither **Honor Flight** nor the provider of private aircraft (a.k.a. “Flight Provider”) provides medical care. I understand that I accept all risks associated with travel and other **Honor Flight** Network activities and will not hold **Honor Flight**, the Flight Provider, or any person – volunteering, appearing, or quoted in any advertisement or public service announcement for or on behalf of **Honor Flight** – responsible for any injuries incurred by me wile participation in the **Honor Flight** program.

SIGNATURE**\***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_

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

PRINTED NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please submit this form ALONG WITH A COPY OF YOUR DRIVERS LICENSE OR LEGAL PHOTO ID**

**To: Sullivan Hartogh Davis, Post 730 Honor Flight**

**P. O. Box 182**

**Cedar Falls, Iowa 50613**

*The Sullivan Hartogh Davis Honor Flight is an official Hub of the Honor Flight Network*

*Direct Emails to:* cwhitedog67@gmail.com or fmagsbhc@hotmail.com

*Website: cedarvalleyhonorflights.org*

We can also be located on Facebook: Sullivan Hartogh Davis Cedar Valley Honor Flights