## **Volunteer Application for Never Forgotten Honor Flight**

**Never Forgotten Honor Flight** would not be successful without the dedicated help provided by the volunteers. Assistance is required from office management and clerical support to airport assistance that aids the veterans both at the beginning and at the end of each trip.



For further information please contact Never Forgotten Honor Flight at 715 573-8519 or www.neverforgottenhonorflight.org.

Full Legal Name (matcl	hing photo ID for travel):		
First	MLast	Date of Birth: M/D	/Y
Address:			
City:		State: Zip Code:	
Phone: Day	Evening	Mobile	
E-Mail Address:			
Occupation:		Are you a Veteran? Yes	No
T-Shirt Size: S M	L XL XXL		
If a Veteran please indi	cate the Branch of Service a	and when and where did you serve:	
·		,	
1. How did you learn a	bout the Honor Flight organ	ization?	
2. Why are you volunte	ering for Never Forgotten H	onor Flight?	
3. Please list any prior	volunteer experiences		
4. There are several vo	olunteer opportunities. Plea	se indicate all areas of interest to you.	
Administrative	<del>)</del>		
Outreach (i.e.	Information booth, speaking	g)	
Special Event	s (Planning, Fund Raising)		
Trip Support (If you would	like to be a guardian on the	flight please see separate application)	

5. Pleas	se list the be	st time for you	ı to work as a	volunteer.			
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	J						
Afternoo	on						
Evening	J						
6. Pleas	se list two (2)	) personal refe	erences.				
1	) Name:						
	Address: _						
2	) Name:						
	Address: _						
	E-Mail Add	dress:					
	Phone Nur	mber:					
6. Eme	rgency Conta	act Information	n:				
	Name:						
	Address: _						
	City/State/	Zip:					
	E-Mail Add	dress:					
	Phone Nur	mber:					
	Relationsh	ip to applican	t:				

## Please review carefully and sign

The undersigned acknowledges and agrees that:

- 1. As photographic and video equipment are frequently used to memorialize and document Never Forgotten Honor Flight trips and events, his/her image may appear in a public forum, such as the media or website to acknowledge, promote, or advance the work of the Never Forgotten Honor Flight program. I hereby release the photographer and Never Forgotten Honor Flight from all claims and liability relating to said photographs. I hereby give permission for my images captured during Never Forgotten Honor Flight activities through video, photo or other media, to be used solely for the purposes of Honor Flight promotional material and publications, and waive any rights of compensation or ownership there of.
- 2. I further state that medical insurance is the responsibility of the volunteer and I understand that neither Never Forgotten Honor Flight nor the provider of private aircraft (Flight Provider) provides medical care. I understand that I accept all risks associated with travel and other Never Forgotten Honor Flight network activities and will not hold Never Forgotten Honor Flight, or the flight provider, or any person appearing or quoted in any advertisement or public service announcement for or on behalf of the Never Forgotten Honor Flight responsible for any injuries incurred by me while participating in the Never Forgotten Honor Flight program.

SIGNED *	Date	
(E-mail applicants must sign prior to providing volunteer services)		
*If under 18 a parent or guardian must also sign and date below		
Parent or Guardian	Date	

Please submit this form to: Never Forgotten Honor Flight
Attention: Volunteer Application
4404 Rib Mountain Drive #234
Wausau, WI 54401

Or e-mail to: info@neverforgottenhonorflight.com